

ADOPTING THE "HARD-TO-PLACE": SYSTEM CHANGE IN
A PUBLIC SERVICE BUREAUCRACY

by

THOMAS EVAN NUTT

B.A., The Pennsylvania State University (1965)

M.T.S., Harvard Divinity School (1970)

M.C.P., Harvard Graduate School of Design (1970)

Submitted in Partial Fulfillment

of the Requirements for the

Degree of Doctor of Philosophy

at the

MASSACHUSETTS INSTITUTE OF TECHNOLOGY

September, 1973

Signature of Author.....

Department of Urban Studies and Planning
August 13, 1973

Certified by.....

.....
Thesis Supervisor

Accepted by.....

Chairman, Departmental Committee on Graduate Students

Rotch





Room 14-0551
77 Massachusetts Avenue
Cambridge, MA 02139
Ph: 617.253.2800
Email: docs@mit.edu
<http://libraries.mit.edu/docs>

DISCLAIMER

MISSING PAGE(S)

(Pages 206 & 250)

ABSTRACT

Title of the Thesis: Adopting the "Hard-to-Place":
System Change in a Public Service Bureaucracy

Name of the Author: Thomas Evan Nutt

Submitted to the
Department of Urban Studies and Planning
in Partial Fulfillment of the Requirements for the
Degree of Doctor of Philosophy

The movement to adopt "hard-to-place" children represents a significant change in adoption practice in the United States. The changes which have resulted from this movement are best understood by considering adoption as a public service bureaucracy, with the important elements part of a client-bureaucrat exchange system.

A public service bureaucracy is an organization operating in the public interest. Bureaucrats in such organizations are faced with a dual compliance dilemma, which arises out of the tension between imperatives for public good and imperatives for personal comfort. The dilemma is made more intense when client groups or bureaucrats attempt to redefine their role or to assert themselves more strongly. In the face of this dilemma bureaucrats attempt to create a situation of bureaucratic stability. The extent to which they are successful is determined in the client-bureaucrat exchange. The exchange has two levels: the meta-exchange, in which the confidence of clients and bureaucrats in their own theories of action is the critical variable, and the exchange, in which role congruency between clients and bureaucrats is the critical variable.

In adoption the traditional role for the bureaucrat has been that of evaluator, and that of the client is patient. The movement of adopt the "hard-to-place" introduced new roles for clients and bureaucrats. Clients now view themselves as resources, and bureaucrats are educators. Change in adoption can be explained by the extent to which clients and bureaucrats have confidence in maintaining old roles or operating in new roles, and by the extent to which roles chosen are congruent in any given situation.

The history of adoption practice is discussed, with particular emphasis given the history and people involved in the movement to adopt the "hard-to-place", to the professionalization of adoption, and to issues of supply and demand in adoption.

The impact of the movement to adopt the "hard-to-place" on adoption as a public service bureaucracy is considered. To do this, the adoption process is divided into eight phases: pre-contact, initial contact, family study, waiting, placement, trial period, legalization and post-legalization. Each phase is considered in detail from the point of view of adoption agencies, families who are "early hard-to-place" adopters (pre-June, 1970), and families who are "later hard-to-place" adopters (post-June, 1970). A national sample of such families was gathered in September 1970 by mail. A sample of early and later HTPs in Massachusetts was gathered in May 1973 by personal interview, along with interviews of adoption agencies and workers. The experiences of families and agencies at various points in time, for each phase of the adoption process, is described.

Changes or lacks of changes evident in this description are analyzed as to cause. In general the introduction of a younger clientele with biological children, the creation of adoptive parent groups, and the presence of "innovator" bureaucrats are major factors in changes described. Only four of the eight phases show significant change. Where change has not occurred it is often because neither bureaucrats nor clients have been able to articulate any roles other than those traditionally carried on. Though confidence in traditional roles is often decreased creating a situation of bureaucratic instability, they remain dominant in the absence of any compelling alternatives.

Thesis Advisor: Dr. Martin Rein, Professor of Social Policy

2.

CONTENTS

	<u>Page</u>
Contents	2
List of Charts and Tables	3
Acknowledgments	4
Introduction	5
Chapter 1 - Concepts, Theory and Methodology	8
Chapter 2 - Adoption Practice: Its History and Reported Changes	35
Chapter 3 - The Movement to Adopt the "Hard-to- Place": Its History	49
Chapter 4 - The Movement to Adopt the "Hard-to- Place": The People Involved	63
Chapter 5 - The Professionalization of Adoption	76
Chapter 6 - Issues of Supply and Demand in Adoption	84
Chapter 7 - The Pre-Contact Phase	119
Chapter 8 - The Initial Contact Phase	135
Chapter 9 - The Family Study Phase	149
Chapter 10 - The Waiting Phase	174
Chapter 11 - The Placement Phase	180
Chapter 12 - The Trial Period Phase	192
Chapter 13 - The Legalization Phase	204
Chapter 14 - The Post-Legalization Phase	213
Chapter 15 - Conclusions	222
Appendix A - Comparison 1970 National Sample of Trans- Racial Adoptive Families and 1973 Massachusetts Sample of "Hard-to-Place" Adoptive Families	244
Appendix B - Value Survey	249
Footnotes	257
Bibliography	285

3.

List of Charts and Tables

Chart Number	<u>Page</u>
1 - Client-Bureaucrat Exchange System: The Meta-Exchange	21
2 - Client-Bureaucrat Exchange System: The Exchange	25
Table Number	
1 - Male Age at HTP, by Year HTP	66
2 - Instrumental and Terminal Value Rankings, HTPs and Matched Sample	70
3 - Combined Rankings of Reasons for Hard-to-Place Adoption, by %	73
4 - Illegitimate Live Births, by Race and Age of Mother; 1940 to 1968	87
5 - Estimated Illegitimate Live Births, 1969-1972	92
6 - Estimated Illegitimate Live Births, Corrected by Year for Availability of Contraception and Abortion 1969-1974	94
7 - Estimated Number of Children from Minority Races Who Were Adopted, 1957-1971	102
8 - Black Children Placed by Type of Family 1968 to 1972	103
9 - Immigrant Orphans Admitted to the United States FY 1966 to FY 1972	105
10 - Placements Through Massachusetts Adoption Resource Exchange (MARE) by Type and Year FY 1969-1972	107
11 - Families Registered with MARE for "Hard-to-Place" Children by Type and Year FY 1969-1972	108
12 - HTP Children Adopted by Type, Massachusetts Sample, by %	110
13 - Non-Relative Out of Wedlock Adoptions and Total Illegitimate Live Births 1957-1971	114
14 - Estimate of Surrender Potential by Race, 1971	115

ACKNOWLEDGEMENTS

To my dissertation committee -- Lisa Peattie, Lee Rainwater, Robert Weiss, and especially Martin Rein, advisor and good friend -- who by their constant challenges to my easy assumptions and conclusions forced me to do more than comfort suggested, and in the process got me to produce a volume better than I had dared hope for;

To John A. Snyder, closest of friends and fellow-traveler as trans-racial adoptive parent and researcher in adoptions;

To Lawrence E. Susskind, good friend, gentle critic and tenacious editor, a constant source of intellectual challenge and useful peer group pressure;

To John J. Fifield, whose sharp mind and compassion for people made sense of mounds of data;

To the many people who were helpful in finding information, especially Mrs. Leova Wolfe, my voluntary clipping service; Mrs. Cecilia Sudia and Miss Ursula Gallagher of the Office of Child Development; Dr. Ann Shyne and Ms. Barbara Haring of the Child Welfare League of America; Marshall Proctor of the National Center for Social Statistics; and the many patient librarians;

To the hundreds of families who have adopted black kids, Korean kids, Vietnamese kids, older kids, kids with emotional and physical difficulties, kids in sibling groups, kids of all sorts -- thinking and writing about our common experience is the pleasure of sharing thoughts with and about family and friends, and I thank you for your patience;

To the tens and hundreds of adoptions professionals with whom I share common cause, and to those whom I have annoyed or who have annoyed me -- you all are sources of hope for kids and families;

To that good and gentle person, Clayton Hagen, who reminds us that the child is parent to the man, and who is himself parent to us all;

To D. George Spagnolia, Jim Atkins and Bob Case, with whom I have shared many cups of coffee, morning newspaper, trivia quizzes and good conversation in the breaks from actual writing;

To Richard and Dorothy Nutt, my parents, and Thomas and Beatrice Smailes and Evan Burchall Nutt, my grandparents, whose love for me as parents to son and grandparents to grandson gave me a family to remember;

And finally to Julia, my wife, and Kirsten and Michael, our children, writing this was less a chore than a labor of love, because you were there to make it all real.

INTRODUCTION

The decade of the 1960s was a time of great change in social services. This time of change began with the Ford Foundation's Grey Areas program, continued with President Kennedy's sponsoring of Juvenile Delinquency and Community Mental Health Program, and was best symbolized in President Johnson's War on Poverty. New motifs were introduced, among them citizen participation, open decision-making, social activism, system-wide change. New constituencies were discovered, or discovered themselves. Social policy literature became increasingly preoccupied with these transformations, especially in terms of their impact on professional practice.¹ In the wake of these changes child welfare policy underwent a sharp transition.² The traditional dominance of the professional was challenged, especially in the field of adoption.

Families who adopt, and especially the children whom they adopt, have always been good grist for the media mill. Sunday newspaper supplements of feature articles describing the changes going on in adoptions. When major personalities adopt, as did Barbara Walters of NBC's Today show, it makes news -- and adoption makes the Today

show as a morning's featured discussion topic! One major newsmagazine made "The New Face of Adoption" a recent cover story.³ The professional journals speak about a "little revolution" in the field.⁴

What does it mean to say that adoption has changed? For some it means that infertility is no longer a requisite, that couples who have already had children biologically can adopt. For others it means expanding the pool of potential adoptive settings to include single-parents. In other cases it may mean the practice of trans-racial adoption, or even broader, the adoption of children heretofore labelled "hard-to-place". Key changes have occurred in the adoption process -- what goes on, who is involved, and in what ways. Others point to efforts to recruit minority families into the pool of potential adopters, and to the creation of agencies (or agency sub-units) to respond to adoption and other child-welfare issues for minority communities. In still other instances it may mean the increasing interest in intercountry adoptions. Finally a growing number of adoptive parent groups are involved in adoption in a variety of ways.

The broader societal context in which adoption occurs has also changed. In general, the range of acceptable life-styles has broadened. Communes, "living together", Women's Liberation, Gay Liberation, "no-Fault" divorce laws are all indicative of new understandings of family. In a review article dealing with family in the 70's, Sussman suggests that central to this new understanding is "a pluralism in family forms existing side by side, with members in each of these forms having different problems to solve and issues to face."⁵ In this broader setting adoption is no longer a second-best-to-biology way of creating a family unit.

How are the changes in adoption to be assessed? How and why did they take place? What additional changes are probable? This dissertation attempts to answer these questions with a special focus on adoption of "hard-to-place" children.

The increase in placements of "hard-to-place" children over the past 10 or so years, both numerically and proportionately, is significant. During the earlier years the largest group of "hard-to-place" children being placed were black. As a result, the popular notion is that the movement was one for trans-racial adoption. While black and oriental children continue to constitute a large proportion of such placements, focusing solely on the trans-racial aspects of the movement misses a number of more important trends.⁶

This investigation is organized into four parts. Section I presents basic concepts and theoretical approaches for data analysis. The research methodology is discussed. Section II reviews the development and present state of adoption policy, with a particular emphasis on the movement to adopt "hard-to-place" children. This discussion considers the perspective of both adoption workers and adoptive families. Supply and demand factors are considered. Section III consists of a detailed description and analysis of the changes that have actually occurred in the past several years. Section IV summarizes these changes, and discusses them in light of the substantive contributions to adoption policy, and to an understanding of how change takes place in a public service bureaucracy.

CHAPTER 1

CONCEPTS, THEORY AND METHODOLOGYADOPTION

In a formal sense, adoption is a legal process by which a parent-child relationship is created. In non-relative adoptions this new relationship is created only after a biological parent-child relationship is severed, either by surrender or by order of the court. Relative adoptions usually involve a stepparent, and require only the consent of the biological parent with custody. Only non-relative adoption is discussed in this study.

In this formal sense adoption has roots as far back as the Babylonian Code of Hammurabi. Adoption was also part of the formal legal framework in the Roman Empire, in early Spanish law and in the Code of Napoleon. The "Great Code" of Alfonso V of Castille, for example, provided for investigation to show whether adoptions were good for the children involved.¹ Adoption in the United States has a limited common-law tradition. Most U.S. adoption law is statutory, separately enacted by the legislature of each state. Common to the laws of every state is the fact that adoption creates a statutory, rather than a contractual, relationship between the adopting and adopted parties.² The first adoption law in the U.S. was enacted by Massachusetts in 1851. Though a Uniform Adoption Code was developed by

the National Conference of Commissioners on Uniform State Law in the early 1950s, little unanimity on adoption law existed then or now, and the Uniform Code was not generally accepted. Perhaps the only generally adopted element of adoption law is the mandate for a study by the state (either through the court or its appointed agent) of the suitability of the proposed adoptive relationship.

Though the legal definition remains the generally accepted understanding of adoption, the definition used here is somewhat broader. Adoption is the creation of a permanent family relationship by the permanent placement in the family of a child who is not the biological child of the one or more parents in the family. This definition is sociological, rather than legal, as it refers to the functional incorporation into a family of a child not the biological offspring of the parent(s). It permits legal consummation of the adoption in the formal sense described above. It also includes as adoption, for example, the practice of permanent foster care, in which guardianship is vested in the placing agency though the child is not legally freed for adoption. The functional outcome is the creation of a parent-child relationship, with legal approval via the guardian, but not legal adoption.

The definition of "hard-to-place" children is straightforward. A "hard-to-place" child is one (or a category) for whom there is not an abundance of applicants. The term is perhaps infelicitous, conjuring up as it does images of second-best, or unacceptable. This has occasioned the creation of numerous euphemisms--children with special needs, children who are waiting, the adoptable child. Nevertheless

considered from the perspective of a system premised on placing children, a child or category for which there is no demand is "hard-to-place."

Who is and who is not "hard-to-place" can be ascertained without difficulty. "White infants in normal health are readily placed for adoption....However, for some children there is a serious shortage of adoptive applicants. These include children of minority races or those of mixed racial background, older children, children with physical or emotional handicaps, and groups of children from the same family."³

"Hard-to-place" children, then, are all those other than healthy white infants.⁴

This definition is a cause of some annoyance on the part of parents who have adopted so-called "hard-to-place" children, and of considerable embarrassment to social workers. No family considers the child they adopt "hard-to-place." Though such families do recognize that adoption is unusual and that the particular type of child they adopt is unusual among adoptive placements (in the sense of not as frequent as available numbers), they value the child as intrinsically desirable, and not at all second best. Social workers are embarrassed because the differentiation of easy- and hard-to-place arose through application of presumably professional standards of practice. Until very recently professional practice proceeded on the assumption that only perfect children could be placed--and that the only perfect children were healthy white infants. "Hard-to-place" children became so, almost solely because of differential valuation by professionals in the field.

It is a measure of how far, and yet how little, things have changed that every child is now considered at least "hard-to-place." For many years many children were simply considered to be absolutely unadoptable.

THE ADOPTION PROCESS

There are eight phases in the adoption process:

1. Pre-contact -- This includes all activities prior to the family's formal contact with an adoption agency. During this phase the possibility of adopting is contemplated.

2. Initial contact -- The initial contact with an adoption agency represents the family's entry into the formal adoption process. The initial contact phase includes all orientation aspects of the adoption process.

3. Study -- During the study phase the family and agency formally consider the possibilities and ramifications of adoption.

4. Waiting -- The waiting phase commences when the determination is made at the conclusion of the study phase that an adoptive placement is desirable. During the waiting phase a child (or children) is actively sought.

5. Placement -- The placement phase begins when a child (or children) is presented to a family for consideration. This phase includes all activities leading up to full-time placement with the family, and includes the initial period of actual placement. It slightly overlaps the trial period.

6. Trial period -- The trial period extends from full-time placement through to legal confirmation. During this time the agency retains guardianship of the child.

7. Legalization -- The legalization phase slightly overlaps the end of the trial period. It includes all preparation necessary to create the permanent legal status, and court action.

8. Post-legalization -- This phase includes all activities after the creation of permanent legal status. During this time no formal agency contact is mandated by statute.

The adoption process can be viewed from the perspective of its many participants--biological parents, temporary setting personnel (foster parents, institutional child care workers), agency personnel (administrative, lawyers, adoption workers, support workers) child, adoptive family, court personnel, and various support networks (kin, peers, organizations.) For each the process has a different meaning and outcome. In this study primary attention will be given to the family, as it is the single constant in each phase of the adoption process. In focusing on the family, attention will be given to other participants in the adoption process as they have primary contact with the family. Thus, for example, relatively little attention will be directed to the biological parents of adoptive children. On the other hand considerable attention will be directed to adoption workers and agencies.

A FRAMEWORK FOR THE ANALYSIS OF CLIENT-BUREAUCRAT EXCHANGES

Adoption is an example of a client-bureaucrat exchange system. Potential adoptive families and professional adoption workers bring certain conceptions about themselves, each other, the premises and content of the adoption process and the desired outcomes to the exchange system. The conceptions of these two primary participants in adoption may either clash or conform. Whatever the particulars of the exchange it always takes place in a definable setting, that of a public service bureaucracy. The exchange system therefore involves adoptive families (clients) and professional adoption workers (bureaucrats). To understand this system it is necessary to establish an overarching framework for the analysis of client-bureaucrat exchanges.

The Concept of Bureaucracy

For most students of organization the concept of bureaucracy, specifying features of organizational form and operation, is the starting point.⁵ At the center of most theories of bureaucracy are concepts of rationality and order. In the traditional formulation, knowledge rationally administered is the basis for organizational efficiency. Levels of knowledge and the adeptness of individual bureaucrats in utilizing information create and sustain a hierarchical structure. Acquiescence to superior knowledge and skill is a requisite for efficiency. Achievement of efficiency is simplified by vesting knowledge and skill impersonally in offices, with individuals holding office by virtue of specialized training. Personal gain is through advancement in office. Benefit from

effective use of the powers of office comes to the organization, not the office holder.⁶

To fully appreciate the concept of bureaucracy it is necessary to understand factors leading to dominance and acquiescence.⁷ Dominance is a power relationship in which the dominant participant believes he has the right to exercise power and the acquiescent participant believes it is his duty to obey. In a situation of established domination it is the beliefs of the participants which legitimate the exercise of power as it is the configuration of these beliefs which establishes the tendency toward stability or change in the system of domination. As traditionally postulated there are three types of domination: charismatic, traditional and legal. Charismatic domination is based on the power and persuasiveness of the unique individual leader. In traditional domination the legitimization of power comes from the belief in the eternal past, in the rightness and appropriateness of the traditional way of doing things. Legal domination is domination based on rules, and is the manifestation of a bureaucratic situation. The trend to bureaucratization is accompanied by the routinization and demythologization of charisma and tradition. Whatever the rationality of bureaucratic or legal domination, however, it is still based on a set of beliefs mutually accepted by the dominant and acquiescent participants. The procedures of bureaucratic domination cannot be efficiently applied

Uses and Elaborations of the Concept of Bureaucracy

In the traditional sense rationality implies the appropriateness of means to ends. Bureaucracies, by definition, ought to be efficient, though in colloquial terms, bureaucracies are presumed to be inefficient. Nothing in the traditional formulations explains this contradiction. Yet the prevalence of inefficiency in most complex public organizations is too extensive to ignore. Some have suggested that this may be attributed to the introduction of non-rational aspects of individual behavior.⁸ Others suggest that control by formal rules can lead to a lack of flexibility and to making ends of means. Alternately, organizational goals may simply be a means to achieve individual goals. Thus the formality of rules has the potential for both inflexibility and mis-direction.⁹ In most such instances, the dominance/acquiescence issue appears to be a central concern. It is therefore an important factor for further investigation.¹⁰

Organizations are under pressure to be effective. Typically this pressure is evidenced by a concern for internal efficiency. The problem of achieving internal efficiency is exacerbated in situations where the dominance/acquiescence issues are not solely internal to the organization.¹¹

Public Service Bureaucracies

The dominance/acquiescence issues are especially difficult when environmental constraints are demanding. This is perhaps most true in public service bureaucracies. Public service bureaucracies are those

organizations operating in the "public interest" (for example, police, public library, hospital) or in the "interest" of a specific portion of the public (for example, child welfare agency, social service center for elders, veterans' out-patient clinic).¹²

Because public service bureaucracies have dual rather than singular congruent sources of definition of organizational mission, bureaucrats in public service bureaucracies are faced with a dual response dilemma. The dual response dilemma arises out of the tension between external more broadly defined goals and internal more narrowly defined goals.¹³ In public service bureaucracies the dual response dilemma is exemplified by the tension that exists between broadly defined imperatives for public good and more narrowly defined imperatives for organizational achievement. The dilemma is further heightened by the imperatives for public good being put forward by sources external to the bureaucracy, while those for organizational achievement are typically internally generated. In adoption, for example, imperatives for public good include such purposes as 'the best interests of children', 'the creation of happy families', 'the upbringing of children to be useful contributors to society', and so on. Such broadly stated imperatives often come from sources like state legislative bodies, church groups, or parent organizations. Imperatives for organizational achievement often relate to such purposes as 'the limitations of the burdens of office', 'the acquisition of adequate resources', or 'the bureau-

crat's search for self-esteem, approbation of others, or monetary remuneration'. These more narrowly defined imperatives are typically internally generated. Though the dual response dilemma is constant in public service bureaucracies it becomes more intense when new interpretations of either imperatives for public good or imperatives of organizational achievement appear. Such new interpretations may occur either within or without the bureaucracy. In either occasion they will create a disruption to the prevailing resolution of dominance/acquiescence issues.

In such situations of intensified dual response dilemmas, various mechanisms are created to resolve dominance/acquiescence issues. In public service bureaucracies, for example, professional organizations are formed to help deal with these tensions. For the bureaucrat, allegiance to professional organizations serves as a form of acquiescence to broad imperatives toward public good. The professional organization will assert that compliance with public good ends is assured through its selection, socialization, sanction and reward functions in relation to its member bureaucrats.¹⁴ The professional organization therefore becomes the bureaucrats' intermediary with external, dilemma-creating forces. The professional organization as spokesman for bureaucrats shields them from public scrutiny of what might otherwise appear to be comprises of public good imperatives in favour of

more modest goals of organizational achievement. Similarly, consumer organizations are often formed to more actively promote a new conception of the public good imperatives incumbent upon a particular public service bureaucracy. Thus both bureaucrats and various public forces can put forward competing ideologies. Moral entrepreneurs can exist both within and without a public service bureaucracy, advocating new conceptions of public good or organizational achievement imperatives, and in the process shaking up the prevailing resolution of the dominance/acquiescence balance.

CLIENT-BUREAUCRAT EXCHANGE SYSTEMS IN PUBLIC SERVICE
BUREAUCRACIES

The notion of stability in bureaucracy is another portion of a concept of bureaucracy. Rationality, order, the appropriateness of means to ends all tend to reinforce the bureaucratic stability -- a type of equilibrium which enables the bureaucrat to predict and control

events. Disruptions are avoided; there is a general constancy in events and their explanations. This proclivity of bureaucracies toward stability is what Schon calls "dynamic conservatism."¹⁵

The thrust toward stability in the bureaucracy "does not come from the stupidity or venality of individuals within the system..."¹⁶ Rather it comes because the bureaucracy provides a means of livelihood, protection from threat, economic security and especially "a framework of theory, values and related technology which enables individuals to make sense of their lives."¹⁷ Thus maintaining a stable state requires that prevailing solutions are not subject to reexamination.

The Meta-Exchange

The 'dynamic conservatism' of public service bureaucracies is embedded in the prevailing theories of action held by bureaucrats. Bureaucrats seek stability in the client-bureaucrat exchange system. The first of the two levels of that exchange system is the meta-exchange, represented on Chart 1. The confidence that bureaucrats and clients have in their own theories of action is a critical variable in the meta-exchange.

Confidence for either of the participants in the exchange depends on two factors: (1) the support derived from groups and (2) the apparent success or failure of the conventional wisdom. The broader the reference group the greater the degree of confidence. Thus bureaucrats seek to strengthen their professional organization internally, or through collaboration with those of related professions.

The existence of a wide-spread consumer movement will increase the confidence that clients have in scrutinizing bureaucrat behaviour.¹⁸ The apparent success or failure of the conventional wisdom can also reinforce or undermine the sense of confidence that professionals and clients bring to the exchange system. Do particular paradigms or theories of action accurately predict and/or control events? If so, the bureaucrat is confident that the traditional approach is justified. If not, a client is much more likely to challenge the bureaucrat's authority.

In the meta-exchange there are four types of confrontation. In one category there is a clear tendency toward bureaucratic stability; in two other categories there are slight tendencies toward instability; and in the remaining category there is a definite tendency toward bureaucratic instability.

1. Bureaucrat Confidence High, Client Confidence Low

Bureaucrat confidence will be high when there is a strong professional organization endorsing certain interactional norms, and when current theories of action seem to predict or allow for control of events fairly precisely. In adoption the Child Welfare League of America and the National Association of Social Workers serve to provide the bureaucrat with a broad reference group. A past history of successful placements will also bolster a bureaucrat's confidence. Clients will have a low level of confidence if they apply to adopt without prior personal knowledge of adoption (gained through an adoptive parent organization or from friends or acquaintances who have adopted.)

Chart 1

Client-Bureaucrat Exchange System

The meta-exchange, and its potential
for bureaucratic stability

Client Sense of Confidence

High (-)

Low (+)

Bureaucrat	High (+)	+ -	++
Sense of			
Confidence	Low (-)	- -	- +

(+) = situation tending toward bureaucratic stability

(-) = situation tending toward bureaucratic instability

Confidence will also be low among childless couples who are uncertain of their parenting ability. When bureaucratic confidence is high and client confidence is low there is a definite tendency toward bureaucratic stability.

2. Bureaucrat Confidence Low, Client Confidence Low

Bureaucrat confidence will be low if there is no professional organization of any stature or if there is competition among various professional groups. Bureaucrat confidence will also be low if theories of action are underdeveloped, or the conventional wisdom does not provide satisfactory explanation of various kinds of current events. A strong reference group will probably not be able to counterbalance the loss of confidence created by the failure of theories of action. This is true because the stature of professional organizations depends in large part on their ability to sell the public on the potency of the professional point of view. When bureaucrat confidence is low and client confidence is low there is a slight tendency toward bureaucratic instability. If the client is not willing to challenge the presumption of bureaucrat dominance the bureaucrat will proceed without disruption. But as soon as bureaucratic confidence begins to erode, the chances of the bureaucrat's activities being questioned by organized client groups begins to heighten.

3. Bureaucrat Confidence High, Client Confidence High

If bureaucrat confidence remains high for the reasons described above and client confidence is also high (based on a broadened constituency of the clients or security in own theories of action) the

tendency toward bureaucratic instability increases. In adoption client confidence can increase because of association with organized parent groups. Similarly client confidence can increase if the potential family has had children biologically. This enables the client to assert the success of personal theories of childrearing. The degree to which interactions of this type tend toward bureaucratic instability depends on the congruency of bureaucrat and client perceptions, especially in theories of action.

4. Bureaucrat Confidence Low, Client Confidence High

In adoption this typically is a situation in which the bureaucrats' theories of action are proved to be inaccurate, with clients advancing alternate explanations which seem to be more accurate. Clients most often will be doing so from an organizational base. An example would be a widening gap between number of available children and number of placements. Such a situation contradicts the bureaucrats claim that their approach to adoption is serving children. The inaccuracy of the bureaucrats' theories will be further underscored if parent groups operate recruitment programs which successfully place large numbers of children.

The Exchange

The meta-exchange provides a context within which the actual client-bureaucrat exchange takes place. Central to the exchange are the role perceptions that clients and bureaucrats have for themselves and for each other. If perceptions are congruent the exchange will proceed satisfactorily. If perceptions are not congruent, the exchange will proceed with varying degrees of difficulty. From another perspective, if the exchange is proceeding satisfactorily it is likely that perceptions are congruent.

Insofar as adoption is concerned, the client-bureaucrat exchange system has three participants, the professional adoption worker, the potential adoptive family and the potential adoptive child. Typically, however, the exchange involves only the worker and the family. The child is most often silent. The second of the two levels of the exchange system, the exchange, is presented in Chart 2. For the bureaucrat in adoption there are two dominant role perceptions, that of evaluator and that of educator. Clients in adoption perceive themselves as either patients or resources.

1. The Evaluator/Patient Exchange. The Evaluator/Patient exchange is congruent. The bureaucrat acting as evaluator sees his job as one of rooting out pathology. Each member of the family must meet certain standards set by the worker. The worker assesses the family to determine which child will best fit in. When a couple see themselves as patients they accept the view that they have a problem that requires rectification. Traditional adoptive couples see their problem as one of infertility. Because they have no children the couple accept that they ought to be evaluated and judged. They presume that the bureaucrat is then to guard against other problems occurring because of the client's urgency in solving their childlessness.

2. The Evaluator/Resource Exchange. This is an incongruent exchange. While the bureaucrat perceives of himself as an evaluator the clients do not admit to having a problem. On the contrary, the clients see themselves as a resource. In such exchanges, the clients do not enter the exchange to "get" something they cannot get elsewhere

25.

Chart 2

Client-Bureaucrat Exchange System

The Exchange

Client Role Perception

Patient Resource

Bureaucrat	Evaluator	Evaluator/Patient	Evaluator/Resource
Role			
Perception	Educator	Educator/Patient	Educator/Resource

(as is the case with the childless, infertile couple). Rather they enter the exchange expecting to provide a source of assistance. Typically such clients have biological children, and therefore do not assume that the bureaucrat's role is to guard against any harm they might do to adoptive children.

3. The Educator/Patient Exchange. This also is an incongruent exchange. The role of the bureaucrat as educator is to provide the client with information and a setting in which to learn enough to decide for themselves whether or not to adopt. The bureaucrat's role is to raise with the family the various unique issues which might arise from this situation. The assumed role for the client is that of family unit, independently capable of functioning and making decisions. This role perception is incongruent with a couple's perception of themselves as patients. The worker does not presume that there is a problem that requires solution. The family as client, however, assumes that the worker will solve its problems and certify them by virtue of the bureaucrat's authority as evaluator.

4. The Educator/Resource Exchange. This is a congruent exchange. The bureaucrat perceives of his role as educating an independently competent family to the unique issues of family expansion by adoption. The family perceives of its role as providing a resource for a child, fulfilling that role by a bureaucrat who serves as a guide.

Summary of Client-Bureaucrat Exchange Systems

The client-bureaucrat exchange system operates on two levels. The meta-exchange is the legitimational dimension. It is based on the

extent to which clients and bureaucrats feel confident about asserting the correctness of their theories of action. The outcome of the meta-exchange under various conditions of client and bureaucrat confidence are greater or lesser degrees of bureaucratic instability. The exchange is the actual interaction of client and bureaucrat defined by the role perceptions that each participant has about and the other. The extent to which role perceptions are congruent in the exchange determines the degree of satisfaction that participants are likely to have.

STUDY METHODOLOGY

There are three sources of original data for this study: 1970 data on trans-racial adoptive families; 1973 data on families who have adopted "hard-to-place" children; and 1973 data on agencies doing adoptions in Massachusetts. The techniques used to collect each set of data will be described separately.

Trans-racial Adoptive Families, 1970¹⁹

The data on trans-racial adoptive families (TRAs) was collected by means of a mailed questionnaire. The questionnaire contained questions in four major areas: family socio-economic information, individual bio-psycho-social information for both male and female adoptive parent, value and attitude information for both male and female adoptive parent, and family perception of the adoptive process and outcome. The Rokeach Value Survey, developed by Dr. Milton Rokeach, was used to collect the value and attitude information.²⁰

Questions for the remaining three areas were developed specifically for the study. The questionnaires were distributed to their members by voluntary groups of adoptive parents throughout Canada and the United States. At this time most such groups were involved in promoting placement of "hard-to-place" children; during and previous to the time of data collection most such placements were trans-racial, either black or oriental children. A total of 4,500 questionnaires were initially bulk mailed to the parent groups. 998 questionnaires were returned, for a gross return rate of 22.1%.²¹ As the questionnaires were returned, they were examined by a clerk for obvious lack of self-coded information or serious ranking problems within the Value Survey. A total of 192 were found to be unusable. Of the 806 remaining, 179 identified themselves as interested bystanders (i.e., non-TRA parents), 25 identified themselves as in the process of trans-racial adoption but not having accomplished the fact, and 24 were caseworkers (5 of whom were also TRAs.) Data was compiled for electronic data processing. The Value Survey analysis was made with a parent sample of 615, including caseworker parents. Further review and machine error reduced the final number of families to 578. An additional 14 single parent families were removed from the sample, leaving a total data base of 564 two-parent families, which was used in the analysis of characteristics other than the Value Survey.

The Value Survey had also been administered by Dr. Rokeach through the National Opinion Research Center (NORC) in 1970 to an area probability sample of Americans over 21. This representative national

sample was chosen as a powerful tool against which to contrast the value profile of the TRAs. The TRAs were matched for age and education with the NORC sample. In general TRAs register much high educational attainment than the national sample, as well as being a much younger group for the education levels reported. The final matched group number 222 for males, and 243 for females and were achieved through a process of selecting the smallest number in each cell of the table as the number of persons available for matching.

The question of sample reliability is difficult to resolve. Available data on the extent of trans-racial adoption at the time of data collection was not very good. The best estimate was provided by the Opportunity Program in Oregon, which has conducted a national survey of agency placements by race. Their data showed a total of 4,336 black children placed in 1969, 1,447 (33%) with white families. About one-fourth of respondents adopted trans-racially in 1969. As 71.8% of the sample had adopted only one child trans-racially an estimate of the total number of trans-racial placements as of the time of data collection (September, 1970) is slightly above 6,000. Thus it is conceivable that questionnaires reached as high as 75% of the possible universe of respondents, and that the parent sample used is roughly 10% of the possible universe. Regional return was roughly in proportion to initial distribution; concentrations by areas of the country represented locations where trans-racial adoptive placements had been taking place in greater numbers and/or for a longer period of time.

It is not possible to represent the data as having strict scientific reliability; the sample was not randomly selected, etc. However, the data can be validly used on two bases. First, the general profile of TRAs which emerges from this data compares favorably with that of studies the data for which was obtained under more controlled circumstances.²² Second, and more important, is the theoretical framework within which the data will be used. The approach used in the collection of this data (as well as the other data used in this study) is that described by Glaser and Strauss as "theoretical sampling."²³ In the theoretical sample data is not gathered to precisely test pre-stated hypotheses. Rather a population is sampled to get a sense of its richness and variations, to be a source for the generation of theory. Thus conclusions and findings are iterative, and form the basis for theory development. The theoretical sample approach is not verificational, but generational. Reported data is not generalizable in the quantitatively verified sense most often referred to by sociologists; rather it is indicative of what is known (or needed to be known) in order to expand and illumine present understandings of reality.

Hard-to-place Adoptive Families, 1973

Forty (40) adoptive families were personally interviewed during May, 1973. All families lived in the Greater Boston area at the time of interview, though not necessarily at the time of first hard-to-place adoption. Again sample selection was within the context of theoretical sampling. In this instance the emphasis was on obtaining in depth the perspectives of these families on their experiences in the adoption

process. The broad criteria used in sample selection included:

1. Half the sample to be "early" and half "later" HTP adoptive families. Early HTP families were defined as those in which the first HTP placement took place at least three years previous, which would place the beginning of the adoption process for early HTPs no later than 1969. The year of initial placement of early HTPs ranged from 1957 to 1970; the most recent placement was April, 1970. 11 of the 20 placements occurred in 1968 or 1969. Later HTP families were defined as those in which the first HTP placement had taken place within the previous three years, which would place the formal beginning of the adoption process no earlier than 1970. Placements with later HTP families ranged from June, 1970 to May, 1973, with fairly even distribution by year.
2. At least 10 of the 40 families to be non-bio, that is without biological children. In fact, 15 of the 40 were non-bio, 4 of whom were "early HTPs" and 11 of whom were "later HTPs."

Additionally a successful effort was made to have the families distributed throughout the Greater Boston area, including core city, and suburban and exurban families north, west and south of Boston.

Families selected were all associated with the Open Door Society of Massachusetts, an organization of adoptive parents. The involvement of the families in ODS activities ranged from considerable to minimal. Some families had been very active, but decreased activity recently; others had remained active over a considerable period of time; still others were only recently active; others merely attended occasional meetings or received the mailings. 13 of the 20 early HTPs can be characterized as having, at some point, active ODS involvement; 9 of the 20 later HTPs have been actively involved in ODS. The greater participation by early HTPs in ODS activities relates to the early conditions of the movement to adopt the "hard-to-place" and the nature and size of the organization at that point in time.

Prior to the interview each family received a letter of confirmation indicating that the intent of the interview was to obtain their thoughts on the adoptions process. Interviews were taped (except in cases where the family requested otherwise) to permit thorough review and accurate representation of points of view. Each family completed a 'Family Basic Data Sheet,' providing basic socio-economic information and information on the children in the family. No pre-established questions were used in interviewing. Rather each family was encouraged to tell its own story of the process, using, therefore, a 'dramaturgic' approach to data collection. Each family was assured full confidentiality regarding information. Families were usually frank about their experiences, and showed that they had given considerable thought to adoption quite separate from the purposes of this study.

Adoption Agencies and Related Professionals, 1973

In a form roughly comparable to that undertaken with the HTP families, caseworkers agencies in Massachusetts agencies presently involved in adoption were interviewed. These interviews, which also took place during May, 1973, had two purposes. The first was to get up-to-date information on the practices being utilized by professionals in adoption practice. Second, to obtain the perceptions of professionals on the nature and reasons for changes in the field in the preceding 5 or so years.

Extensive interviews were conducted with workers in nine agencies regarding specific practices in those agencies. Among the agencies were the public agency, private sectarian and nonsectarian agencies with center city locations, and private sectarian and nonsectarian agencies with suburban locations. Interview participants varied from agency to agency, though in each case included caseworkers directly involved in placing "hard-to-place" children. In agencies with smaller staffs (2-3 workers) interviews were conducted either jointly or separately with all workers. In agencies with larger staff interviews were conducted with the adoption unit director, with supervisors and caseworkers, again either jointly or separately. In all, 24 professional adoption workers participated in interviews at the 9 agencies. In addition to the 9 agencies, a group interview was conducted with 10 workers from 5 agencies in the western part of Massachusetts. (1 of the 5 agencies was also interviewed separately.) Also interviews were conducted with a number of professionals in

positions related to adoption, such as the director of the Massachusetts Adoption Resource Exchange, and staff of the newly created Massachusetts Office of Children.

Interviews was confirmed in advance by a letter similar to that used for HTP parents. The letter outlined the primary purpose of the interview, along with the model of the adoption process being used in the study. Interviews were taped to permit thorough review and accurate representation of points of view. Again no pre-established questions were used in interviewing, though the model of the adoption process did provide the general framework for discussion.

Chapter 2

Adoption Practice: Its History and Reported Changes

Even though adoption policy developed as part of the "child saving" movement of social reform around the turn of the century, adoption practice has developed as distinct from other child welfare activities. In this chapter the key features of adoption practice are examined. No attempt is made to cover practice or its development in full detail.¹ Rather important developments are noted. Changes, consolidations and uncertainties in adoption practice are examined. This is not an exhaustive literature review, but is indicative of prevailing perspectives and trends.

HISTORICAL DEVELOPMENT

In the United States adoption is one of many mechanisms used to respond to child welfare needs. Its early statutory enactment, beginning with the Massachusetts law in 1851, preceded general formal usage. Throughout most of the latter half of the 19th century residential institutions were the primary child welfare option. Accept-

ance of the institutional solution was not universal. A somewhat competitive emphasis was put by some on "placing out", a modification of indenture which roughly parallels present foster care practice.²

Adoption policy was strongly affected by the settlement house movement and by social reform efforts at the turn of the century which created juvenile courts, child guidance clinics and the like. The investigatory style of the muckraking reformers coupled with the "friendly visitor" tradition of the settlement house lead to the first major role of the adoption professional. This role grew out of the court's need for a "social investigation...about the child and his background as well as the social situation in the family home into which he (was) to be adopted."³ The court's need, coupled with a statutory provision for a trial period before formal legalization, extended what was a modest investigatory function into a supervisory role for the adoption worker. Investigatory and supervisory functions, along with related protective measures, including restrictions on parental transfer of custody, authorization to change a child's birth record upon adoption, and prohibition of placement by unauthorized persons are based on a bundle of primarily legal measures dating first from an 1891 Michigan statute widening judicial responsibility for an investigation of petitioner situations.⁴ In 1917, Minnesota was the first state to give its public welfare department responsibility for the investigation of adoption petitions referred by the courts.⁵

It was not long until adoption was an activity in which the social worker had predominance. By 1925 a Children's Bureau publication on adoption law had confirmed the trend toward professional discretion in

noting a tendency "toward the use, not of minutely drawn statutory provisions, but of a broad grant of power to an administrative board equipped with workers trained in the investigation of problems of neglected and destitute children."⁶ By 1938 the centrality of the worker's role and discretionary powers were well enough established for the Child Welfare League of America to issue the first of its Standards for Adoption Service, in which the agencies' duties in safeguarding the interests of all parties were emphasized.⁷

During the decade of the forties adoption agencies were criticized for seemingly pointless delays, procedures and rejections.⁸ The shift in public attitude toward and interest in adoption coupled with the accompanying criticism of practice resulted in an increase in self-examination and occasionally defensive explanation by agencies.⁹ The Child Welfare League of America sponsored nationwide studies and workshops in 1948 and 1951. Shapiro concludes that these led to "development of more uniform and improved practices throughout the country, the putting of basic knowledge into practice, and the extension of agency programs to more children for whom services had not been available in the past."¹⁰ Though evidence exists that many more children were available for adoption,¹¹ the more important result seems to have been a further establishment of a particular conception of the adoption process. Although agencies began to give up the notion of guaranteeing the "perfect" baby, they continued to be "zealous in their attempt to find ideal families for children..."¹² This result is confirmed in Smith's 1963 summary of adoption services as related to adoptive families:

The placement agency exists primarily to serve the child regardless of which adoptive home is used or if no adoptive home is used. The adoptive home is a facility for the use of the agency in service to the child although the needs of the families desiring children are met too. Service given to adoptive parents coincides with the agency's primary purpose of serving the child's need for a suitable home. Misunderstandings arise when the agency's primary purpose is not understood by prospective adoptive parents.¹³

Family needs were served by the safeguards used in practice, and did not require direct attention. The typical safeguard of adoption practice was the practice of "matching". The matching of children and parents was a technical judgement made by the professional adoption worker, with reference less to the crude social status criteria of the 20s and 30s and more to psychological development criteria.¹⁴ Thus a wise placement was believed to be "one which gives promise of providing a loving and protecting relationship with mature parents who have enough in common with the child's heritage and characteristics to offer him an opportunity for a sense of identification with them."¹⁵ Though matching was a practice not without its challenges, its utility in blunting general criticism was overpowering.¹⁶

Thus the 1948, 1951 and 1955 CWLA nation-wide efforts all served to confirm and extend adoption practice. The changes which occurred to that point, and from that point to the mid-60s were changes in detail, not concept. There were a number of such changes:

* Group method for intake -- Pruski's 1953 article suggests the group technique as a means of clarifying agency procedures. "In the best interest of the child, the agency wishes to make clear to all applicants just what its purposes are, how it proceeds, and what is required of couples wishing to adopt a child. It has found that an

effective way to do this is by means of a group meeting, not as a substitute for separate, individual interviews, but as a preparation for them."¹⁷

* Efficient waiting list procedures -- The Boys and Girls Aid Society in Oregon established in 1950 a method of keep families appraised of their status with the agency. The plan involved disclosure to applicant families of the basis for agency decision at key points, and a specified time frame for agency decision. "Emphasis is placed on the Society's duty to 'screen in' enough suitable applications to find homes for all the children.... The families are told the kind of things that will affect their chances of getting a child."¹⁸

* Increased supervisory activity in the post-placement phase -- The supervisory period was seen as an extension of the home study, justified on the basis of the legal responsibility for the child and the consequent protective role of the worker. "The more skillful we become the more we can play the integrative role, reducing the need for authoritative action to a minimum"¹⁹ The potential for authoritative action, however, remained central to the role definition of the worker.

* Increased pool of potentially adoptable children -- Beginning with Tafts' 1952 article,²⁰ there are increasing references in the literature to various definitional and programmatic attempts at placing children heretofore thought to be unadoptable. Weeks (1953) reports on adoption for school-age children in institutions,²¹ Leatherman (1957) on older children,²² Dunne (1958) on minority children,²³

Yanekian (1958) on inter-country adoptions,²⁴ Dukette and Thompson (1959) on black children specifically,²⁵ Lyslo (1961) on American Indian children,²⁶ and Hornecker (1962) on the handicapped.²⁷ Though the pool of children expanded, the process of adoption was not substantially modified. For example, Dunne describes her agency's policies regarding its program to place minority children, and concludes that "there has been no need to modify the casework approach...."²⁸

MID 1960s: THE WATERSHED YEARS

By the mid-1960s consolidations in adoption practice presumed to have occurred following seven years of intense national efforts beginning with the 1948 CWLA workshop began to crumble. Agency practice was subjected to sharp criticism by researchers, professionals and adoptive parents. Practices which presumed a predictive capacity on the part of workers and which retained control of the process and decision for the worker were severely questioned.

Fanshel for example commented on the nature of adoptive practice thusly:

To my mind, the so-called screening process in adoption has been overly emphasized, when, in fact, the major contribution of adoption agencies may lie elsewhere, namely with work to be undertaken with couples in preparation for a demanding parent role....I would maintain that all we can expect of caseworkers, based on knowledge that originates from research in child development and with special clinical experience is that they will be able to spot the manifestly poor risks among adoptive applicants.²⁹

Similarly Kirk's 1964 book, *SHARED FATE*, presented a serious challenge to the conventions of adoption practice.³⁰ Agencies experienced a

decrease in the ratio between white adoptive applicants and children, and despite all of the demonstration programs and literature urging creative action "hard-to-place" children were still in a "desperate position."³¹

Two summary articles prepared in 1965 are illustrative of competing claims being made by and for adoption practice. Madison suggests that changes led

to offering more service to new adoptive parents and to interested applicants who are not yet ready to adopt. Agencies have been moving away from unrealistic eligibility requirements....Eager as they are to welcome would-be adopters, agencies are careful to observe objectively their clients' "motivation for parenthood" and to evaluate their potential for creating a truly nurturing home.³²

But the changes had not altered the primacy of the social worker in the process:

Greater emphasis is placed on the prime importance of professionally educated staff, a staff prepared to carry the initial and continuing responsibility for services, including referral and consultation, to the natural parents, the child, and the adoptive parents.³³

In contrast to Madison's analysis is that of Turitz. In a paper based on more than 100 replies received in response to a CWLA request for suggestions for revision of the CWLA Standards for Adoption Services, Turitz concluded that there was a growing awareness by workers

of the scope and limitations of their professional skills and knowledge, and (their feeling) less responsible for assuring outcome and more responsible for making continuing help available to parents and children in developing their capacities for growing and living together as a family.³⁴

The increased modesty on the part of workers is supported by an analysis of the results of research and practice in the ten years since the CWLA National Conference on Adoption in 1955:

In spite of extensive research activity and reporting of practice experience, little has been added to knowledge or practice theory in the past ten years that validates current practices or prescribes more effective ways of assuring desired outcomes.³⁵

Rowe's 1966 handbook for adoption workers can be read as the culmination of nearly 50 years of professional adoption practice.³⁶ But in the face of a new movement for reform, the book was soon outdated. Its publication, however, marked a watershed in adoption practice.

A key figure in changing the adoption practice has been Clayton Hagen. Until recently Supervisor of the Adoption Unit, Lutheran Social Service of Minnesota, Hagen introduced the educative approach to adoption. This approach presumes healthy motivations on the part of applicants and establishes the worker's role as facilitator and educator. He promoted his approach in speeches and papers delivered and distributed throughout the U.S. and Canada. A series of three papers, written during the mid-60s, provided a set of new concepts for adoption practice.³⁷

The paper entitled "The Premise of Adoption" questioned traditional assumptions about parenthood. The traditional attitude, said Hagen, assumes that the true child is the one born to the parents. This attitude has been incorporated into agency practice by requiring infertility. Otherwise families might favor their "own children" or their "natural children" over adopted children. In short, true parenthood meant reproduction. As a result agency practice conveyed to adoptive parents that they were not really "true parents". This raised problems for both the child and the family especially in the areas of the child's identity and self-concept. Hagen, however,

suggested that parenthood is separable from physical reproduction. Those who can effect this separation can be parents to a child by adoption. From this simple and straightforward distinction came an entirely new approach to adoption. Hagen suggested that people need good information, not therapy, in dealing with the tasks of living. If given good information, people will make good decisions. Adoptive couples, according to Hagen's new ideas, can neither find personal meaning nor be good parents by meeting agency standards.

The basic notions are expanded in the second of the papers, "An Approach to Adoption." Here Hagen expands the concept of adoption to include both adoptive children and adoptive families on an equal footing by suggesting that agency practice should be viewed as aiming toward a plan for the family rather than whether or not family members meet certain requirements set by the agency. The agency is facilitator, rather than decision-maker. Concluding that, at the very least, there is much uncertainty about social work's ability to evaluate and decide who should be approved and who should not, Hagen suggested that instead workers should be more interested in the questions parents have than in causing parents to be concerned about worker questions. On this basis he contended social work can perform a valuable function, helping people sort out their feelings, being able to plan better what they should do.³⁸ Valuing potential adoptive parents in their own right, not simply as a resource for children, means that the agency is less likely to create a dependency relationship with them. The entire adoption process then becomes a time of considering options

and sharing experiences. Post-placement then becomes a time for the new parents to share an experience which is of great meaning to them with someone who has been a part of the experience. Within the context of this general approach Hagen also raised for the first time the notion of group meetings serving as parent preparation classes, as opposed to their use in making more efficient conveyance of procedural information about agency practice.

The third of these three seminal papers by Hagen, "Basic Values in Adoption" showed most directly how the new concepts he was proposing related to the adoption practice. The problem for social work in adoption, he said, comes in trying to base a program on how social workers think it should be. The breakthrough in his agency came "when we began to consider what the people had said to us about how adoption was for them."⁴⁰ The problems of a system which inherently tended towards defensiveness and distrust, where people couldn't talk openly and honestly with each other about something so important as adoption, became clear when Hagen talked with an adoptive father about these concerns. His answer was:

As long as you have something we want as much as a child, and you can keep us from having it, I'm going to tell you everything that I think you want to hear, and not tell you anything that would cause you to question me⁴¹

What Hagen found was that the adoption process was narrowly focussing only on the placement of the child, not on the development of a family. In protecting the rights of the child, workers were depriving applicants of their rights as parents. Hagen therefore concluded that instead

of treating interested parents as "applicants" they should be recognized as probable parents. Professional irresponsibility, said Hagen, putting the discussion into the realm of the code of ethics of the worker, is as serious a potential in not accepting a possible home as in agreeing to a placement. Responsibility, he concluded, "is best discharged by sharing it and we most easily fail by trying to retain it ourselves."⁴² Based on these new concepts, a number of innovations in practice occurred in Hagen's agency, some of which he notes in this paper:

- * Parenting as a focus -- The requirement of infertility was eliminated. The question of whether and how parents can rear a child they did not biologically reproduce became the topic of joint discussion. The agency also offered parent classes on various aspects of family functioning.

- * Shared decision-making -- Proceeds on the assumption that people can make better decisions for themselves than the agency can make about them.

- * Decreased dictation -- Workers give a description of the family and honest impressions, rather than the distorted views which tended to emerge when the worker had to support his decision by documentation of why he decided as he did. This is linked to shared decision-making.

- * Group meetings -- Used both before and after placement as a place where adoptive parents consider issues and experiences of parenthood.⁴³

* Eliminate matching requirements -- Eliminating age restrictions resulted in people looking at their age realistically, with the consequence that more homes became available for older children. Similar situations regarding availability of homes for other "hard-to-place" children.

* Recruiting -- Extensive use of adoptive parents, both formally and informally. Friends recruiting friends meant better preparation in the issues of adoption, without "any expenditure of casework time." Similar involvement in agency groups meant a better reality dimension to the process, as was the case for community-wide recruiting.

DEVELOPMENTS SINCE THE WATERSHED YEARS

No new approach is instantly approved or accepted. Hagen's ideas were no exception. However developments reported in the past few years do indicate changes in practice of some significance. Hawkins (1969), for example, discusses the new look in adoptions at the Lake County (Indiana) Department of Public Welfare, citing 13 significant changes premised on there being "no absolute standards when it comes to judging whether certain people will make good adoptive parents."⁴⁴ Similarly Mondloh (1969) reviews changing practice in the adoptive home study at the Children's Home Society of Minnesota.⁴⁵ He cites 10 areas of change, among which are a change in attitudes toward adoptive applicants to sharing responsibility for adoptive planning,⁴⁶ a change away from the worker as a screening person, increased use of adoptive

parents in the adoption process, and a blending of pre- and post-adoption activities.

Recruitment became more extensive, with use of parent groups and the media, including television.⁴⁷ The need for families for "hard-to-place" children became a more central concern, with special programs focused especially on black and older children.⁴⁸ Traditional distinctions between foster care and adoptive care began to blur. Hagerty (1973) describes a program combining foster care and adoptive services into a unified program of family resources.⁴⁹ There are numerous reports of procedural changes. Watson (1972) characterizes subsidized adoption as a "crucial investment."⁵⁰ O'Neill (1972) reports on the use of a computer to identify children in foster care potentially available for adoption.⁵¹ The use of marathon group studies is described by Wiehe (1972).⁵² Bytner and her colleagues (1972) discuss a positive approach for evaluating potential adoptive families and children, and the attitude change resulting.⁵³ Commos (1971) discusses minimizing risks through knowledge.⁵⁴ Finally the Chicago Child Care Society carried on a study of comparative methods in adoption practice. A demonstration project was developed in which a team of workers made placements using premises and methods closely related to the new concepts developed by Hagen.⁵⁵ The results were favorable. The project placed 1 1/2 times as many children as the rest of the department. It made more "hard-to-place" placements, notably older children and trans-racially. Project families closely resembled those served by the remainder of the department, with no indication

of being less successful than the others. The majority of applicants liked the project process, and workers were enthusiastic and deeply committed to the new notions.

A final area of major change has been the increased activity of adoptive parents in the process, especially through organizations. Reports of conferences on adoptions sponsored by such groups indicate the range and sophistication of interests.⁵⁶ Such groups have also begun to affect public policy. ODS of Massachusetts, for example, was instrumental in the creation in August 1970 of the Governor's Commission on Adoption and Foster Care. Its recent report on Foster Home Care in Massachusetts and earlier recommendations leading to the creation of an Office for Children are the basis for significant change in child welfare in the Commonwealth.⁵⁷

Chapter 3

THE MOVEMENT TO ADOPT THE "HARD-TO-PLACE": ITS HISTORY

Change in adoptions has not been an instant phenomenon. Neither is it possible to draw ready conclusions about the sources of change. What is undeniable, though, is the steady growth in interest, here called a 'movement,' on the part of parents to adopt the heretofore "hard-to-place" children. While there are no simple and direct cause-and-effect explanations about change in the adoption process, there is no question that the consumer movement in adoptions has been one of several simultaneous 'necessary-but-not-sufficient' conditions for change. Indeed it may be the most important of these conditions.

EARLY DEVELOPMENT

In the early years, indeed throughout the entire history of adoption up to the watershed years of the mid-1960s, lay involvement in the field did not mean client involvement. The client's role was closely defined as a recipient. Indeed as the field developed families were decreasingly viewed as clients, and more as resources for the children under care, who were the real clients. Such lay involvement as was permitted fit the middle-class motivation to "do-good." Important men in a community were invited to sit on boards of agencies, serving pro bono publico, and their wives did volunteer tasks such as transporting babies from foster homes to the agency for placement.

Because the purpose of adoption was to imitate real families (adoption not being valued in itself) and because confidentiality was a professional value (thus reinforcing the secrecy of the process), there was no thought of adoptive parent groups, or any other form of consumer activity. The only exception was when unhappiness with adoption agencies (especially their delays in placing) emerged in the early 1940s, and lead to the 7 years of assessment by the professionals from 1948-1955. This assessment did not result in any change in consumer role.

THE WATERSHED YEARS

Billingsley, in his study of the bureaucratic and professional orientation patterns of social workers, suggested that there is a small group, which he called "innovators," which shows "a willingness to violate both agency policies and professional standards, if necessary, in order to meet the needs of clients."¹ It was just such a person who provided the initial opportunity for the movement to adopt the "hard-to-place" to begin. Speaking at a COAC-sponsored conference on adoption in October, 1967, Mrs. Muriel B. McCrea, then Director of the Children's Service Centre in Montreal, described the circumstances which led to the beginning of the contemporary consumer movement in adoption.² In the spring of 1958 the agency was doing its yearly review of each case under care. They found that there was not a white

child in the agency free for adoption who had not been placed. There were, however, 187 black children whom they had "never even looked at as adoptable."³ This situation came as a real shock. Since 1940 the agency had been operating on the premise that a basic responsibility was to find a home for every child who needed a home. Thus since that time they had been placing children with physical and emotional handicaps, had eliminated the matching notion,⁴ and had abandoned the evaluative approach to adoption.⁵ In reviewing the situation they found that a de facto policy had grown up which resulted in a backlog of adoptable but unplaced black children. The unmarried parents' department had not been bothering to get consent for adoption from the mothers of black children.⁶ Similarly the foster home department hadn't referred the children to the adoption conference group. The situation was initially taken to the agency's board, which itself was found to have no black members (a situation quickly changed.) A press and recruitment campaign, along with a review of possible adoptive families from among the list of foster families, resulted in 3 adoptions the first year. However, the next year's review showed an increase to 242 of waiting, adoptable black children. In the midst of the discouragement over the apparent failure of the year's efforts the realization came that yet another set of values had intruded, and the agency had reverted to the practice of matching, of deciding for families what was good for them. Resolving to proceed with the black children on the same basis as all others, three prospective adoptive parents were approached regarding adopting a black child; and three children were

placed in one week. Mrs. McCrea's comments at this point were revealing:

Thus we learned something else about ourselves through this program: the greatest reservations through all the time we have worked with the program have been on the part of the social worker....We have had to work with our staff all the time to go back over the same basic things I have told you--the commitment to the needs of the child and the realization there are people available who are interested and able successfully to raise a child of another race.⁷

The shift to direct involvement of the parents in the choice was the beginning of the movement to adopt the "hard-to-place," for it was this group of three families who formed the nucleus of the Open Door Society of Montreal.

This group of three pairs of parents, who adopted the first three Negro children, immediately expressed great concern for the fact we had had these children buried. They have been wonderful people to work with, and they have always been exceedingly frank, so they let us know in the beginning they did not have a high opinion of our public relations ability. They realized that these children had been available and nobody had ever heard about them. Why couldn't they get into the act and help tell the world that these children existed?⁸

Thus, the first ODS was formed, and the publicity began. Major magazines, newspapers, television quickly picked up the story, and spread it throughout North America. ODS also began to function as a mutual support group, and gradually as a catalyst for change in adoption. The agency, for example, added a requirement that all parents come to a general interpretive meeting of ODS where "the fact that adopting is not just exactly like having a child of your own" is discussed. But the most important and immediate result was the increase in placement of black children. 8 the first year, 19 the second, 33 the third, and

then up to about 50 per year as of the time of the COAC conference.

The consumer movement to adopt the hard-to-place began, then, related to an agency which considered itself to be innovative, but found its role challenged by the consequences of its own practice. When the agency could not resolve the situation by its own efforts, it shifted its attitude toward the client, giving them the option of determining the outcome of the situation (that is, would you consider a black child?). With the outcome a success, the clients felt free to challenge the agency on related aspects of its practice (the publicity, for example). Having successfully participated in agency functions beyond the terms of traditional client status, the families went on to create a lay organization to do likewise in relation to the entire adoption process.

In the late 1950s, however, the Montreal ODS situation was a definite exception to the rule. A Massachusetts parent, who adopted two Oriental children during this time, recalls that, to a request to meet with other families who were adopting Oriental children in order to share common experiences and problems, the worker's only response was incredulous silence. The matter was not pursued.

The only other early evidence of the consumer movement in adoption is the Holt Adoption Program.⁹ Begun by Harry Holt, a retired Oregon lumber merchant and farmer, the program was responsible for a large number of adoptions of Korean children in the late 1950s and early 1960s. The original intention of Holt and his wife was to adopt several Korean children themselves. Holt went to Korea to make the needed arrangements. Publicity about his efforts resulted in a great

number of people writing him expressing interest. He consequently returned to Korea to establish an orphanage, and created a rather efficient process for placing the children with American couples using proxy adoption. Established adoption agencies and organizations were hostile to Holt's operation, as it was not licensed, was not operated by professionals, and apparently violated the accepted canons of adoption practice. They did eventually succeed in changing immigration law eliminating the use of proxy adoption. However, the large number of Korean trans-racial placements made before Holt's program was curtailed inevitably led to the creation of informal organizations of such families. (Sometime after Holt's death in 1964 the program became licensed, and is currently recognized as among the most effective in the field.)

Thus by the "watershed years" there was some early groundwork for the creation of a consumer movement of significant import. The Montreal ODS experience suggested the need for publicity, support, recruitment and a basic change in the nature of the adoption process. The Holt experience provided an example of success in challenging accepted standards of practice, including even creating an agency outside the established adoption circles.

The creation of Michigan's Council on Adoptable Children (COAC) is a good example of the organizational thrust of the movement to adopt the "hard-to-place." Most such groups began in the watershed years (or are second generation groups, begun by persons who were involved in such early groups). As such they were contemporaneous

with the broader social movement for citizen participation, notably in the OEO and Model Cities Programs of Johnson's 'Great Society.' Peter Forsythe, COAC's President at the time of the Frontiers in Adoption conference, recalled the formation of COAC:

COAC was formed in 1966 by half a dozen interested families who had adopted from several agencies and had different kinds of experiences. All of us had been successful in adopting. I mention this to show that we didn't start as disillusioned rejects or people with problems in that regard anyway. We saw that we had something in common. We were interested in minority and mixed race children...our concern extended further to all the children for whom our community seems unable to plan at the time they need homes. These children include older kids and physically handicapped youngsters.¹⁰

In pursuing its purposes COAC developed a four-part program:

- (1) Community education--The community must be made aware that children need homes and couples with parenting abilities must learn that they are needed as adoptive parents for children.
- (2) Agency education--COAC works with agencies, if they're interested, letting them know what applicants say and feel. We support sound programs and constructively criticize those which we feel are unrealistic.
- (3) Mutual support--Social and experience exchange among families.
- (4) Legislative action--Legal and legislative changes that might be made to make agencies' jobs easier and to benefit the child and family.¹¹

COAC, like most such groups, was loosely organized on a membership basis, was not agency-related, wide extensive use of informal meetings and newsletters for communication, and focused its general activities on creating a climate of agency responsiveness to clients and adoption issues. As Forsythe noted, the essence of the movement and the

organizations leading it is the role as 'change agent,' "for it has been clear to us that the community is more ready to accept the children than the agencies are ready to place them."¹²

DEVELOPMENTS SINCE THE WATERSHED YEARS

The movement to adopt the "hard-to-place" is now a prime force for change in adoption. From a situation of many small struggling citizen groups the movement has developed into a strong, coordinated force.¹³ Perhaps the best way to summarize the developments is to look in some detail at the activities of one group, the Open Door Society of Massachusetts.¹⁴

Like COAC, ODS-Mass. was organized in 1966. A relatively small group of parents, most of whom had adopted trans-racially through one agency in the Boston area, met periodically, at first under the sponsorship of an ecumenical center, to exchange ideas and experiences. With purposes roughly comparable to those of COAC-Michigan, the group began formal operation as an organization in 1967, aided by the assignment of a staff member from the Boston-area agency then most involved in trans-racial adoption. Since that time the organization has expanded from the initial membership of 32 families, to a mailing list of more than 600 families, social workers agencies, and other interested persons. Its activities likewise have expanded.

* Geographical organization -- ODS initially capitalized on its function as an informal support network by organizing into geographical

sub-areas. Most of the eastern half of Massachusetts was divided into areas of responsibility. Each area had a chairman and working committees, and operated support, recruitment, publicity, agency-relations, and other programs, mostly autonomously. As the organization grew in size the areas became smaller, always maintaining a commitment to informality of contact among adoptive parents.

* Recruitment -- A major role which ODS plays is recruitment of potential adoptive parents. A variety of means have been used. Among them are brochures, slide-show, speaker's bureau, bibliography, and major media coverage. The most successful of the efforts on a large scale are the major-media efforts. At first the group concentrated on major Boston newspapers, TV and radio stations. Feature articles, and special programs about adoption were usually coordinated with the Massachusetts Adoption Resource Exchange, (MARE) which would be the contact point for follow-up calls and letters. On receiving an initial, one page information form MARE would refer interested families to agencies in their area, based on MARE's knowledge of current agency workloads. This enabled interested persons to be seen with greatest speed. As ODS grew in size, and its geographical organizations became more specific in focus, local community-oriented newspapers and radio stations were also used. This proved equally successful, as persons who adopted were well known often because they had grown up or worked in the community. This made the initial 'apprehension threshold' easier to cross.

* Support network -- The support network functioned at two levels. The first related to those persons at the early stages of interest in adoption, and is tied closely to the ODS recruitment effort. As part of the recruitment campaigns, the ODS function as a support group was highlighted. Since publicity usually focused on the experiences of one or a few families who were ODS members, these families were often contacted directly by interested persons. But more important a formal referral process was established with MARE in which every family returning the initial information form was routinely referred to the ODS area chairman for the geographical area in which they lived. An important part of the localized support network was to facilitate face-to-face contact between adoptive parents and those considering adoption. Monthly ODS area meetings, picnics, informal evenings of coffee and talk were all opportunities for potential adoptive families got a chance to "test their fantasies against reality."¹⁵ In this way families could explore the many aspects and implications of adoption informally and without the pressure of the agency setting, with persons who had been successfully completed on adoption. This process served an informational function. Formally it acquainted interested persons with the types of children available (using the MARE Book, a loose-leaf notebook updated monthly with photos and descriptions representative of currently waiting children) and with the specifics of agency adoption. Informally, it introduced interested families to the realities of family formation by adoption, especially in relation to unique issues of adopting a "hard-to-place" child. With the success of the referrals to ODS by MARE

evident, agencies began routinely referring to ODS families who contacted the agencies directly.

A second level of support activity related to families who have had children placed. ODS found that in general agencies and workers did not provide much useful support after placement, often because unfamiliarity with what might happen. By definition agencies had not made many "hard-to-place" placements. Thus there was little experience to serve as a guide. Consequently, families who adopted created their own network of support. Initial focus was on the adjustment issues which occur on placement--the grandparent problem (especially in trans-racial adoption), the child's 'fit' to the family, the musing about whether it was a 'right' decision, the reality of children having an existence independent of the parents (a by-product of non-reproductive family formation), etc. A sponsorship pattern resulted. Families who had adopted within the preceding year or two "sponsored" current adoptions, watching over and advising on the progress of a family's adoption from initial agency contact through legalization, a time of 15-24 months.

Such support efforts were localized, and served to reinforce the ODS geographical area form of organization. However, as the total number of families who had adopted increased year by year, with more of them successfully completing the legalization stage, it became clear that there would be long-term areas for support activity as well. These long-term areas were less directly personal, and had more to do with the category of adoption. For example, families who adopted black

mentally retarded children, black children, oriental children, single-parent adoptions, infertile couples, etc., now sit on the board. ODS has been legislatively active, especially in relation to prompting the formation of the Governor's Commission on Adoption and Foster Care.¹⁷ Many of the recommendations coming from this commission are the result of ODS suggestions and/or experience.¹⁸ Key staff positions in the recently created Office for Children are held by persons whose initial interest in the area came via adopting and ODS involvement. Similarly one of the early ODS officers now chairs the MARE board; other ODS members sit on agency boards, or serve on inter-agency adoption committees. ODS members who have moved from the Boston area have also been active in forming similar groups, including those in New Hampshire, Rhode Island, New York, New Jersey and Connecticut.

* Information exchange -- The ODS newsletter is a form for information flow, especially regarding emerging trends in adoption, changes in agency policy, newly available resources and the like. In November 1970, ODS sponsored the second of what have become bi-annual North American conferences on adoption.¹⁹ These conferences are occasions for information generation and exchange, as well as opportunities for the consumer movement to determine next directions. Information of a more general sort is provided through particular ODS members writing books in the adoption area.²⁰

* Changes in agency practice -- An early activity of ODS was a series of dialogue meetings with agencies in the greater Boston area. The purpose of such meetings was to convey to agencies and workers the

children became concerned about providing such children with knowledge of and connection to black culture and heritage. Thus ODS began sponsoring programs dealing with these topics.¹⁶ Similarly a concern among families who have adopted children from Korea and Vietnam has been the unique medical requirements. Many of the diseases with which the children arrive are unknown to U.S. physicians. By working together ODS families have succeeded in getting certain Boston-area doctors (especially pediatricians) to develop knowledge in this area. In a more personal way ODS parents who have adopted children from Vietnam and Korea have developed an informational paper summarizing many of the types of adjustment problems and possible responses in relation to such children.

As long-term activity has related to the type of child adopted, so too has it related to type of parent adopting. Infertile couples have long operated under a severe disadvantage in adopting, their infertility seen as a problem bordering on pathology. ODS families who are biologically childless have recently formed a sub-group, and are carrying on an investigation of agency policies and practices regarding childlessness with the intent of developing greater understanding on the part of agencies, physicians and others.

* Advocacy of the interest of children -- From an initial focus on black and mixed-race children, ODS has expanded its interests to encompass all "hard-to-place" children. The ODS board was reorganized to provide for 'functional' area representation. Persons with interests in older children, handicapped children, children with emotional problems,

thoughts, feelings and perceptions of adoptive parents about agency practices, with the hope of obtaining useful changes on a voluntary basis. As ODS expanded such meetings were held with agencies in satellite communities as well (Lawrence/Lowell, Fitchburg, Worcester, etc.) Though it is not possible to generalize about the results, many agencies did begin to use ODS in terms of its support network function. More recently ODS families have been involved in the adoption process itself. Hegarty, for example, refers to the use of families as series and group leaders in the New England Home Family Resources Program.²¹ Other agencies involve ODS families in orientation meetings, within the group study process, and in post-placement group meetings. ODS satisfaction with agency practice remains uneven, and the possibility of alternative "agency" forms and ways of satisfying the legal requirement for a family study are constantly under discussion. As with other parents groups, ODS had discussed forming its own agency.²²

The Open Door Society of Massachusetts, then, is a voluntary organization of persons interested in encouraging the adoption of hard-to-place" children. Most of its members are adoptive families, or those interested in adopting. Its strength derives from this, and from the nature of the support network which ODS provides for its adoptive parent members. ODS also provides an organized means of expressing client point of view regarding the adoption process. It is in establishing and maintaining an organizational basis for client participation in adoption that ODS becomes a strong force for innovation in the adoption process.

Chapter 4THE MOVEMENT TO ADOPT THE "HARD-TO-PLACE": THE PEOPLE INVOLVED

Families who adopt "hard-to-place" children differ demonstrably from both the general population and the population of families who adopt normal, healthy infants in-racially. (Hereafter such families adopting hard-to-place children will be referred to as HTPs). In many respects the existence of these clear differences has contributed to the potential for change in the adoption process. The nature of the differences, that is, the differences as they contribute to a family's propensity to act in certain ways, go a long way toward explaining how and why the adoption process is changing.

Two primary characteristics distinguish families who adopt "hard-to-place" children: they tend to have biological as well as adoptive children; and they rank above average on measures of socio-economic status.^{1,2} The typical "hard-to-place" adoptive family can be characterized as economically successful, well-educated, white, suburban, with 3 children, at least 1 of which is biological. It is, in short, the model of what American families are supposed to be.³ The more pertinent personal and family characteristics shows the following:

- 1) Family size and composition: The modal family size is three with nearly two-thirds of the families having one, two or three children. Most families (71.8%) have "hard-to-place" adoptive child: most (75.0%) have at least one child biologically.

- 2) Location living: Most families live in smaller cities or rural areas (59.7%). This does not differ significantly from the type of location where raised.
- 3) Age: Most males (55.1%) are in the 30-39 age group, while females tend to be in the 25-34 age group (61.0%).*
- 4) Education: Of the males two-thirds are college graduates, with one-fourth holding PhD or professional degrees. Of the females about one-half are college graduates, with one-twentieth holding PhD or professional degrees.
- 5) Occupation: Both males (69.9%) and females (49.8%) are predominantly in the professional or technical occupational category.
- 6) Income: (1970 base) Three-fourths of the families earn at least \$10,000 annually; one-third earn at least \$15,000 annually; and one-sixth earn at least \$20,000. In one-fifth of the families both male and female work.
- 7) Political affiliation: A surprisingly large proportion are Independents (34.0%), though an almost equal proportion are Democrat (31.0%). About one-fifth are Republican, with the other category representing primarily Canadian political parties.
- 8) Religious affiliation: More than half are Protestant (56.7%), with the remainder Catholic (13.8%), Jewish (3.4%) and none (16.3%). Over half attend religious services every or nearly every week.

In general the very homogeneity of families adopting "hard-to-place" children is striking. Rather than being "marginal people--crackpots or rejected normal adopters,"⁴ HTPs meet and surpass the conventional criteria applied to potential adoptive families. By observable standards HTPs are the families for whom traditional adoptions were intended, excepting, of course, their demonstrated ability to have children biologically. The question may then reasonably be asked, what attributes of these families explain their willingness to take such an unconventional step? Why do they adopt, itself not ordinary, and why do they adopt "hard-to-place" children, even more unusual?

DISTINGUISHING DEMOGRAPHIC CHARACTERISTICS

HTPs are of a higher socio-economic status than the typical non-adoptive family. They have greater income, more education, and are more likely to be in a professional or technical occupation. While it might be argued that the importance of this factor lies in the greater capacity of such families to provide for larger families, it is more likely that HTPs, because of their own occupational status and educational background, have a greater understanding of, tolerance for, and, when coupled with other of their attributes, skepticism about the sanctity of the procedures involved in adoption.⁵ The middle- and upper-middle class attributes of HTPs probably also results from the circular fashion in which the pool of adoptive families has been created. Early definitions of the pool emphasized such criteria as ample income and substantial residence. This has tended to become a conventional wisdom about who can adopt, which means that many families who otherwise are well qualified self-select out of the process. But though SES classification is an important distinguishing trait from the general population, it is not a major feature in distinguishing HTPs from other adoptive families. Two other characteristics are more important in that respect.

The first of these is that HTPs are likely to have children biologically at the time of the first "hard-to-place" adoption. This one factor, the inclusion of "bio" families in the pool of potential adopter is probably the most significant of changes in the field, as

TABLE 1

Male Age at HTP, by Year HTP*

Count Row % Column % % of Total	1970	1969	1968	1967-6	1965 or Before	Raw Total
20-29	46 34.8 30.3 8.5	33 25.0 24.4 6.1	29 22.0 27.4 5.4	16 12.1 21.9 3.0	8 6.1 9.9 1.5	132 24.4
30-34	59 33.7 28.8 10.9	50 28.6 37.0 9.2	35 20.0 33.0 6.5	18 10.3 24.7 3.3	13 7.4 16.0 2.4	175 32.3
35-39	33 26.0 21.7 6.1	31 24.4 23.0 5.7	24 18.9 22.6 4.4	13 10.2 17.8 2.4	26 20.5 32.1 4.8	127 23.4
40 and over	14 12.4 9.2 2.6	21 18.6 15.6 3.9	18 15.9 17.0 3.3	26 23.0 35.6 4.8	34 30.1 42.0 6.3	113 20.8
Column Total	152 28.0	135 24.9	106 19.6	73 13.5	81 14.9	542 100.0

$$\chi^2 = 91.44 \quad 12 \text{ df}$$

Sig - 0.001

Missing observations 22

*Corrected for cohort migration

it means that having children by adoption is voluntary rather than non-voluntary.⁶

The second of the two particularly important demographic characteristics is the age profile of HTP families. As Table 1 indicates, a pronounced downward trend in male age at time of adoption began in 1968.⁷ Prior to 1968 the typical male HTP was likely to be 35 years or older. Beginning in 1968 the modal age cohort dropped a full five years, to the 30-34 category. This trend has continued to the present. The 1973 sample of HTPs (including those adopting prior to 1970) showed that half of the males were less than age 30 at the time of placement of the first "hard-to-place" child, as compared with only one-fourth of the national 1970 sample. Considering only the 20 "recent" HTP families, the male age profile showed 60% to have been less than 30 at first placement, 25% to have been 30-34 and 15% to have been 35 and over. (See Appendix A.) The sudden drop in male modal age at time of first adoption is not simply a matter of statistical interest. It reflects in entry into the child-rearing age of a new generation, with consequent differences in motivation and life choices. Religious and political affiliation are two indications of the accompanying changes. Families in which the male was older at time of first placement were more likely to be Protestant, and attended frequently; those with younger males were more likely to have no religious affiliation, and attended infrequently. Similarly older families are more likely to be Republican, younger Independent. Thus the generational differences suggests a shift in viewpoint from conservative to liberal, from acceptance to questioning.

There is a similar change in affectional network. Older families are more likely to have relied on the extended family as a source of support in making the decision to adopt a "hard-to-place" child, while younger families relied on friends. This reflects a generational shift more generally observed from ongoing dependence on and integration into a kin network to ongoing dependence on and integration into a peer network.⁸

MOTIVATIONS

Noting the socio-economic characteristics, the bio-family status and the lowering age profile of HTPs provides only a general way of describing their attributes and qualities. It is important to understand the motivations of HTPs regarding life-choices broadly, and adoption in particular. One commentator, himself an HTP, suggests the difference is one of life style. Referring specifically to trans-racial adoptive parents he says:

Creativity and imagination play an important role in the life style of the couple who adopts transracially.... Their self-awareness leads them to an acceptance of both their good qualities and their limitations. Their limitations do not pose a threat with which they feel unable to cope....Idealism is tempered by the realities of social pressures, but not to the point of acting as a deterrent force in their lives. These adoptive parents seem to be able to utilize social and familial pressures to their own best advantage, and to utilize these pressures to increase their determination to cope with their particular problems in creatively effective ways. Their perspective enables them to view these pressures as challenges to be met rather than as dangers to be avoided.⁹

The analysis is probably true of all those who adopt "hard-to-place" children.

For the present study the motivations of HTPs were considered in three ways. Previous studies have noted the "humanitarian" reasons involved in adoption of "hard-to-place" children.¹⁰ This valuing posture was tested by having respondents in the 1970 sample complete the Rokeach Value Survey. These same respondents were also asked to rank the importance in their decision of a number of reasons which have been offered as relevant to "hard-to-place" adoptions. Finally the 1973 sample of HTPs was interviewed in greater depth regarding their motivations.

Rokeach Value Survey

As noted in the discussion of methodology, the Rokeach Value Survey involves the ranking of two sets of 18 values, one set oriented to 'means' (instrumental) and one set oriented to 'ends' (terminal). For comparative purposes responses of the 1970 sample were matched by age, race and education with responses to the Value Survey obtained by the National Opinion Research Center (NORC) in an area probability sample of Americans over 21. The responses are shown in Appendix B. Table 2 is a composite comparison of male relative ranking of both instrumental and terminal rankings by HTPs and the matched sample.

HTPs have a value profile which reflects a high degree of personal security, enabling them to devote energy to creativity and imaginative activities. They rank such terminal values as 'comfort,' 'world peace,' 'freedom' and 'national security' lower because they have achieved them personally, and/or come from backgrounds in which they are achieved and

Table 2

Instrumental and Terminal Value Rankings
HTPs and Matched Sample

<u>HTPs Rank Higher</u>	<u>HTPS Rank the Same</u>	<u>HTPs Rank Lower</u>
<u>Terminal Values</u>		
An exciting life	Accomplishment	Comfortable life
Equality	World of beauty	World of peace
Inner harmony	Family security	Freedom
Mature love	Happiness	National security
	Pleasure	Salvation
	Self-respect	
	Social recognition	
	True friendship	
	Wisdom	
<u>Instrumental Values</u>		
Loving	Broadminded	Ambitious
	Capable	
	Cheerful	
	Clean	
	Courageous	
	Forgiving	
	Helpful	
	Honest	
	Imagination	
	Independent	
	Intellectual	
	Logical	
	Obedient	
	Polite	
	Responsible	
	Self-controlled	

therefore taken for granted. This sense of personal security and accomplishment enables them to view pressures as challenges rather than dangers. Thus in a time of class and racial turmoil HTPs rank 'equality' considerably higher than their matched sample (4th vs. 8th). Their interest in creative activity is reflected by the higher ranking given 'An exciting life,' while their sense of self-awareness leads them to higher rankings of 'Inner harmony' and 'Mature love.' They do not value 'Ambition,' but do value an affective orientation as shown in the high ranking given 'Loving.' (2nd vs. 8th). HTPs appear to regard more highly those values which have a more abstract, more philosophical, more linguistically developed, more complex and/or a broader frame of reference to their implementation or impact. Values reflecting greater personal discretion, such as 'Loving' and 'Inner harmony' are highly ranked. By comparison non-HTPs tend to rate the more Puritan of values ('Ambition,' 'Salvation,' 'Freedom') more highly. Non-HTPs seem to be seeking for the comfort and personal security which HTPs apparently assume as a given.

Reasons

In the 1970 survey respondents were asked to rank in order of importance reasons relative to the decision to adopt a "hard-to-place" child. These reasons were then combined into three general categories: Personal, Social and Societal. The distinction among the reasons is one of breadth of consideration, from singular, personal reasons (such as desire to have a family) to broader, but essentially person-to-person (social or interpersonal) reasons (such as compassion for children

without homes, or desire to help individuals) to the broadest of reasons having implications for the nature of society (such as desire to control population explosion.) The responses were ranked as to whether they were rated of 'high,' 'medium' or 'low' importance. The ranking therefore provides an indication of the primacy of type of consideration in decision-making.

In certain respects it would be fair to say that there are two broad categories of families--those tending toward the more personal end of the continuum, and those tending toward the more societal end. Bifurcation on this basis would be explained in large part by the factors of age and bio-nonbio. Thus younger families and nonbio families tend to have a more compellingly personal interest in adopting, as it occurs either at an early stage of their family formation process or is the only way in which the family can add children. However, the significant relationship between year of initial HTP and ranking of personal reason shows that this emphasis was more pronounced in the years prior to the "watershed era" in adoption. For most HTPs social reasons, such as the desire to help individuals and compassion for children without homes, clearly dominate. One-third of the families ranked social reasons highly, while three-fourths rank them either at the top or in the middle. The families emphasizing societal reasons tended to be younger and bio, thus fitting in with the emergent lifestyle of the new generation. Families adopting more recently were also likely to give greater emphasis to such reasons. Decisions on family size are made more deliberately, and in the context of broad societal

Table 3

Combined Rankings of Reasons for
Hard-to-place Adoption, by %

Ranking	<u>REASONS</u>		
	<u>Personal</u>	<u>Social</u>	<u>Societal</u>
High	5	35	17
Medium	39	40	19
Low	56	25	64

concerns. Since families citing these reasons are highly likely to have biological children; their family formation decisions have included population control reasons.¹¹

A composite table of ranking of reasons (Table 3) suggests that the modal HTP family falls between social and personal reasons, with the tendency toward social reasons. The growing tendency is for HTPs to emphasize societal reasons. The sample in this category was found to be younger and to have adopted more recently. It is this trend which is especially important regarding change in the adoption process.

The overall pattern of background, value profile and motivations of HTPs adopting a "hard-to-place" child suggests that HTPs are a group of people who view their lives as purposeful and controllable. HTPs are people who sense a personal, private dimension to their lives, as well as an inescapable and necessary societal dimension. They therefore make decisions having a societal manifestation in knowledge of the interconnectedness with their private lives. Though HTPs enter the adoption system intentionally, they do not need adoption. They have other options for family expansion. Thus they have decided to adopt because they feel they have something to give to the children who are awaiting adoption. Because of their own self-confidence, their tendency to make decisions in a broader context, and their flexibility in values regarding interpersonal and family relationships, HTPs are drawn to consider the adoption of "hard-to-place" children. There

perspectives mean that families more recently in the adoption system have a rather distinctly different point of view than those who have traditionally sought to adopt.

Chapter 5

THE PROFESSIONALIZATION OF ADOPTION

The central problem for bureaucrats in a public service bureaucracy is the dual compliance dilemma. To what extent does the imperative for public good dominate? To what degree do imperatives for personal comfort govern? Because the bureaucracy functions for and exists in a public setting there is a threat that a particular resolution of this dilemma can be challenged at any moment. The public can interject itself into the operations of the public service bureaucracy and ask, Why? Because this is disruptive, not only to the ongoing operations of the bureaucracy but also to the theories and strategies of action which bureaucrats hold as legitimating their activities, it is the nature of bureaucrats in such settings to attempt to close out the possibility of challenge. Thus the tendency toward bureaucratic stability relates both to maintaining the operations of the bureaucracy and the explanations of the bureaucrats about their actions. The most common means of curtailing the potential for challenge is to professionalize the operations of the bureaucracy, and to make the professional organization the arbitrar of the dual compliance dilemma.

The professionalization of adoption has involved three elements:

1. Centralization of adoption within adoption agencies.
2. Establishing the adoption worker as the public's agent.

3. Confirming the validity of the adoption worker's judgment.

Centralization of Adoption Within Adoption Agencies

In its earliest use adoption was part of the "child saving" movement. As such it was one of a number of reform efforts occurring during the early part of the century. Because it was one of several such reforms initiated as part of an overall approach to improving the situation of children, its administration was not specific and its use was coordinated with other possible means of assisting particular children.

However, adoption differed from other reforms in that it entails a change in legal status of the child. The change has considerable significance because of its finality. Thus efforts to improve adoption as a method of "child saving" inevitably required attention to the law. The development of adoption law has involved a routinization of the activity, and more importantly a centralization of the function within adoption agencies. Because adoption is a special legal arrangement, it was possible for the adoption workers to argue that it required attention by an agency with special skill. Thus the possible range of participants in adoption narrowed from those in the "child saving" movement in general to adoption workers in particular.

The campaign by professional adoption workers against independent adoption is a good example of the process of centralization. The principles of this campaign were summarized in a 1949 Children's Bureau bulletin. In part they state:

- 1) Placements for adoption should be made only by an agency authorized to do so by the state department of welfare.
- 2) Proceedings should be in a court of record that hears children's cases.
- 3) The court should have the benefit of a social study and a recommendation made by the state department of welfare or an agency designated by it.¹

The implementation of these principles had the effect of centralizing all adoption in the agency. On the basis of the first principle a placement would be made only by adoption agencies. Even if this were not fully realized implementation of the third principle involves adoption agencies in every placement by requiring a social study prior to court ruling on any adoption petition.

Centralization of adoption in agencies controls the potential for bureaucratic instability because the agency becomes the only one (and therefore unassailable) source of children for those desiring to adopt. The legal mandate is extended to make the agency the only point of access to adoption. The original public approval is widened to cover the gatekeeper capacity. "By becoming a gatekeeper to what is popularly valued, the professional gains the additional sanction of being able to make taking his advice a prerequisite for obtaining a good or service valued independently of his advice."²

Establishing the Adoption Worker as the Public's Agent

Becoming an agent of the public interest rather than just a participant with a special interest further controls the potential for bureaucratic instability. The adoption worker's role as advisor to the

court and advocate for the best interests of the child serve as the basis for making him an agent of the public. This role, initially an informal activity later put into statute at the urging of professional adoption workers, has been expanded from mere advisory powers to a de facto assumption of judicial powers. The judicial source powerfully expands the constituency of the bureaucrat in assuming a high sense of confidence in his role perception.

The effect of making adoption workers public agents has been to firmly establish the need for such workers by requiring agency involvement, and to make them responsible primarily to their own sense of the public interest regarding operations, procedures and recommendations about adoption. As Friedson notes, "The solution of the professional is to have himself designated as the expert in such a way as to exclude all other claimants, his designation being official and bureaucratic insofar as formally established by law."³

In becoming the agent of the public adoption workers began to define more closely the particular public interests to be realized through adoption. The Standards for Adoption Service of the Child Welfare League of America propose that the purpose of adoption is

to help children who would not otherwise have a home of their own, and who can benefit by family life, to become members of a family which can give them love, care, protection, and opportunities for their healthy personality growth and development.⁴

In achieving this public interest purpose adoption workers became cautious, using a protective approach.⁵ "Perfect" placements were sought, with alternate solutions used (foster care, institutionalization) rather than making "imperfect" placements."⁶ In making "perfect"

placements (usually white healthy infants with white middle-class families) success was all but inevitable. Thus the results confirmed the validity of the adoption worker serving as public agent, and the validity of the worker's interpretation of the public interest. Though the criteria of selection were often not very sophisticated, they were difficult to challenge on normative grounds. Thus a rule of thumb has been, "Would you place your child in the home?"⁷ One report in an early manual for adoption workers provides specific evidence of the basis on which the public interest was being met.

Many applicants are rejected on their face. They show that the applicant is ignorant, or selfish, or that he lives in a bad neighborhood, or that he has not sufficient financial ability, or that the proper moral influence would be lacking.⁸

Even though the criteria were rough the strategy to protect children against bad placements was clearly consistent with a public interest intent. Thus the adoption worker could claim a valid role as public agent on both statutory and practice grounds.⁹

Confirming the Validity of the Adoption Worker's Judgment

The final element of the professionalization of adoption was to confirm the judgment of the worker as reflective of the public interest as well. It is this element especially which makes the bureaucrats in adoption professional in nature, and completes the professionalization of the activity.

Objectivity in judgment is part of what Kirk calls "the mystery which surrounds the 'social expert' and the organizational arrangements in which he operates..."¹⁰ There is a tendency for any person, when

entering an unfamiliar situation, to yield to the judgments of those considered expert in the field. In adoption in order to make this precedence more stable adoption workers attempted to confirm the validity of their judgments by basing them on presumably objective grounds. Making decisions based on objective criteria meant that they could be questioned only by these criteria. Thus the "public good" dimension of the dual compliance dilemma could not be opened to discussion, especially by clients whose basis for doing so would most likely be subjective. That is, clients are subjective because they want a child.

Objectivity was claimed based on the practice of "matching." Matching of children and parents was a technical judgment made by professional adoption workers, using criteria based on knowledge about psychological development. Thus a wise placement was believed to be "one which gives promises of providing a loving and protecting relationship with mature parents who have enough in common with the child's heritage and characteristics to offer him an opportunity for a sense of identification with them."¹¹

The use of matching to establish the validity of worker judgments is an application of what Rein calls "purposive labeling."¹² This process is directed toward creating a uniformity of practice. In this way an apparent objectivity could be accomplished through common definitions. The labels, however, serve to confirm objectivity, in worker judgment rather than preceding the judgment and being the grounds for it.¹³

In particular the traditional emphasis on viewing individuals as the clients for workers (rather than the family unit) screens out

a variety of external forces which might challenge the validity of the worker's judgment. Defining the professional sphere as involving only individual interaction limits to a more manageable size the area in which the worker must attempt to establish validity.¹⁴ This narrowing of focus did enable workers to demonstrate the validity in their judgment. In support of the need to assess all applicants and reject some, Rowe points out that "gradually adoption workers have come to the realization that couples who apply to adopt are seldom just worthy citizens offering succour to a needy child but usually people with a problem--their childlessness. Adoptive parents are deprived people. Almost all of them have experienced the pain of infertility or inability to bear a live child. They have gone through much disappointment, waiting and uncertainty, all experiences which tend to reduce people's confidence and self-esteem."¹⁵ Thus the process of controlling entry criteria (i.e., requiring infertility) and establishing interpretive labels works to confirm the validity of the worker's judgment.

Conclusion

The professionalization of adoption, a development justifiable as a means of ensuring improved child welfare practices, has also been used to enhance the bureaucratic stability adoption as a public service bureaucracy. This result is similar to Schon's description of the blindness system:

There is an ideology still in good currency among professionals within the blindness system. It centers on concern with individuals rather than with numbers, on high standards of service as defined within the field, on 'worthy' clients (where the blindness system is seen

as deciding both what clients are worthy and what services they should receive) and on a concept of professionalism which defines appropriate behaviour for user as well as for provider. All of this has great influence on the society of the blindness agencies. After all, worthy clients deserve the highest quality of professional service; one need not be overly concerned with the numerous, invisible others. The chaotic nature of information about the system functions as a defense against change. Further, most agencies systematically avoid follow-up--that is, avoid discovering what happens to their clients after service has been provided. As a consequence, the system is cut off and protected from the opportunity for learning. All of these factors serve to reinforce the homeostatic behaviour of the agencies.¹⁶

In adoption the process of professionalization, which centralized adoption practice in adoption agencies, established the worker as the public's agent, and confirmed the validity of the worker's judgment, worked to limit the possibility that bureaucratic instability. Professionalization meant that most of the public good aspects of the dual compliance dilemma could be solved by the professionals themselves, typically through their professional organization. The stability created by this professional resolution of the dual compliance dilemma depends on the continuing ability of the adoptions profession to meet what it puts forward as the appropriate resolution, especially in terms of meeting the imperative for public good.

Chapter 6

ISSUES OF SUPPLY AND DEMAND IN ADOPTION

The conventional wisdom has it that infants, especially white infants, are in short supply for adoption through agencies, and that this situation is partially responsible for the increased interest being shown in "hard-to-place" children. The issue of supply and demand raises a number of interesting questions. How, for example, is supply measured? In periods during which the traditional "perfect" child is in short supply, do workers discover new sources of children, or do they tighten their requirements for adoptive families? What about those families who do not complete an adoption with an agency? Do they turn to independent adoption? Though data is reported on year-by-year changes in adoptions by both Federal and private sources, almost no attention has been given to the supply and demand aspects of the changes.¹

SUPPLY

The first issue is the definition of 'supply,' that is, those children who are potentially adoptable. There are a number of ways in which supply can be defined, including those based on residence, illegitimacy or surrender.

Residence or Sponsorship as a Definition of Supply

The most encompassing definition of potentially adoptable children would include all those children not currently living with their parents,

or not under their sponsorship. There are two ways of calculating this number. The first is based on Census reports. The most recent enumeration, shows that in March 1970, roughly 2,378,000 children fit this definition.² The second, more limited manner of calculation includes only those children not currently living with their parents and not under their sponsorship, and being officially served by public or voluntary agencies. Calculated in this manner the number is 425,000, as of March 31, 1970.³ Both of these figures are based on a single-day census, and therefore tend to under-represent the infant portion of this supply, whether born in or out of wedlock. However, they do include a substantial population often overlooked as part of the supply of potentially adoptable children, namely those in foster care. A number of studies have shown that a sizable proportion of children in foster care are there permanently rather than temporarily. As a consequence it is reasonable to consider them as part of the supply of potentially adoptable children. A recent study revealed that 67.3% of the children had been in foster care 2 or more years. 83% of the children had never been returned to their parents. Only 13.2% of the children were legally freed for adoption, though the social workers considered 31.8% to be adoptable. Interestingly, of the remaining 68.2% not presently considered adoptable only 29.7% fit this category because the biological parents were interested. The remainder were not considered adoptable for a variety of reasons, most of which fit them to the "hard-to-place" category, such as age, handicap, sibling group, emotionally disturbed. etc.⁴ If the proportion of biological

parents interested in their children in foster care is only the 30% noted in the Massachusetts study, then it would be reasonable to posit that 228,200 of the children in foster care in the U. S. as of March 31, 1970 were part of the possible supply of adoptable children.

However this larger definition of the supply of potentially adoptable children has only recently been applied, and at that only in a limited number of places. The Massachusetts report was the first to systematically draw attention to children in foster care as a large pool of potentially adoptable children, and to recommend a major revamping of the foster care and adoption systems to facilitate permanent homes, in most cases adoptive, for children in foster care. There have been some isolated cases of agencies viewing the foster care population as a potential adoptive supply, but they are few in number and are the exceptions which prove the rule that the larger definition is not in general use in the field.⁵

Illegitimacy as a Definition of Supply

A second definition of 'supply' of potentially adoptable children is the number of illegitimate children born each year. An illegitimate birth is one occurring to any woman while she is unmarried, i.e., single, widowed or divorced, or the incestuous or adulterine issue of a married woman.⁶

Illegitimate live births have shown a steady increase in both rate and number in the United States since 1950. As shown in Table 4, in 1940 there were 89,500 illegitimate live births, comprising 3.5% of all births. This represents an illegitimacy rate of 7.1. By 1950 the

TABLE 4

Illegitimate Live Births, by Race and Age of Mother: 1940 to 1968

(In thousands)

<u>Race and Age</u>	<u>1940</u>	<u>1945</u>	<u>1950</u>	<u>1955</u>	<u>1960</u>	<u>1965</u>	<u>1966</u>	<u>1967</u>	<u>1968</u>
Total	89.5	117.4	141.6	183.3	224.3	291.2	302.4	318.1	339.2
Percent of all births	3.5	4.1	3.9	4.5	5.3	7.7	8.4	9.0	9.7
Rate	7.1	10.1	14.1	19.3	21.8	23.4	23.6	24.0	24.1
White	3.6	(NA)	6.1	7.9	9.2	11.6	12.0	12.5	(NA)
Negro and other	35.6	(NA)	71.2	87.2	98.3	97.6	92.8	80.5	(NA)
By race of mother:									
White	40.3	56.4	53.5	64.2	82.5	123.7	132.9	142.2	155.2
Negro and other	49.2	60.9	88.1	119.2	141.8	167.5	169.5	175.8	183.9
Percent of total	55.0	51.9	62.2	65.0	63.2	57.5	56.1	55.3	54.2
By age of mother:									
Under 15 years	2.1	2.5	3.2	3.9	4.6	6.1	6.2	6.9	7.7
15-19 years	40.5	49.2	56.0	68.9	87.1	123.1	135.8	144.4	158.0
20-24 years	27.2	39.3	43.1	55.7	68.0	90.7	92.5	101.6	107.9
25-29 years	10.5	14.1	20.9	28.0	32.1	36.8	35.5	34.5	35.2
30-34 years	5.2	7.1	10.8	16.1	18.9	19.6	18.4	17.3	17.2
35-39 years	3.0	4.0	6.0	8.3	10.6	11.4	10.5	10.1	9.7
40 years and over	1.0	1.2	1.7	2.4	3.0	3.7	3.4	3.3	3.3

NA Not available.

Source: Statistical Abstract of the United States, 1972.

number had risen to 117,400, the proportion to 3.9% and the rate to 14.1. In 1960 there were 224,300 illegitimate live births, which were 5.3% of all births that year, at a rate of 21.8. In 1968, the last year for which national statistics are available, there were 339,200 illegitimate live births, representing 9.7% of births, and a rate of 24.1.

If the same increase in the proportion of illegitimate live births to total live births (0.7% annually the annual increase from 1965-1968) continued from 1968 through 1972 the number of illegitimate live births in 1972 would be approximately 407,000. (See Table 5). A median increase of 0.4% annually would result in 367,900 illegitimate live births in 1972 while a 0.1% annual increase would result in 328,900 illegitimate live births. In that year only in the situation of lowest projected increase in proportion of illegitimate to total live births would the aggregate number of illegitimate live births drop below the 1968 number. Thus on the assumption of an increasing proportion of illegitimate of total live births the pool of potentially adoptable infants would continue to increase through 1972 under nearly every circumstance.

Whether, in fact, the number and proportion of illegitimate live births did increase over this time period is another matter. In the absence of firm statistics only indicative data can be used, and the use of that requires some prefatory comments regarding illegitimacy and its causes.⁷

Cutright posits two direct factors to explain changes in illegitimacy rate: age of marriage, and use of contraception and abortion. Specifically he suggests that exposure to risk (that is, sexual activity among unmarried women) will be lower where age of marriage is late, especially among younger age groups. This lower rate of exposure to risks occurs because younger women are not viewed as old enough to engage in nonmarital coitus and opportunities for legitimation by marriage are low. Conversely an increase in legitimate live births to younger women would be accompanied by an increase in illegitimate live births to younger women. Lowering the age of exposure to risk increases the potential illegitimacy rate because of the propensity of younger unmarried women to avoid use of contraception, even in those countries where its use is general.⁸ On the other hand, though fecundity remains essentially constant as age increases and exposure to risk most probably increases from age 16 to 30 and does not decline for older age groups, the lower age specific illegitimacy rate for those 30 and above is probably explained by the increasing abortion and contraception use of these groups.⁹

How well do these factors explain changes in the rate of illegitimacy in the United States? During the period 1950-1960, conditions measured by these factors were favorable to increasing illegitimacy rates. The U. S., already an 'early' marriage nation, was experiencing an increase in marital fertility. There continued a downward trend in age of marriage. Between 1950 and 1960 the birth rate stayed around 24-25/1,000. Marital fertility rates show a steady

increase from 1945 to 1960. These factors changed in 1960 in a direction which should have produced a decline in illegitimacy, but did not. Overall the illegitimacy rate increased from 21.8 in 1960 to 24.1 in 1968, a 10.5% increase. Though this was proportionately lower than the 54.6% increase between 1950 and 1960 (14.1 to 21.8), it nonetheless is an increase. A number of factors explain the continuation of high illegitimacy rates despite the apparently favorable shift in factors toward lower illegitimacy rates. First, the U.S. continued to be in general an 'early' marriage nation, thus continuing the propensity of younger, non-married women for exposure to risk. Though declining marital fertility was the case, notably in the 20-24 age cohort, illegitimacy decline did not follow in part because responsibility for contraception was shifting from the male to the female, primarily because of technological innovations in contraception diffused after 1960.¹⁰ Though these more reliable contraceptives were being used to curtail marital fertility, they were not being used to a similar extent by never-married women aged 15-19.¹¹ Thus it is not surprising that the proportion of illegitimate live births to unmarried women age 19 and under increased from 40.8% in 1960 to 49.0% in 1968. Also, marriage to legitimate out-of-wedlock pregnancies seems to be inversely related to the out-of-wedlock conceived birth rate, so that decrease in illegitimacy by this means was becoming less probable.¹² Thus several factors seemed to combine to increase the pattern of exposure to risk, while effective birth control and abortion methods were generally unavailable to those in the highest risk categories, namely young never married women.

Table 5, estimating illegitimate live births between 1969 and 1972, is based on a straight-line projection of increase in proportion of illegitimate to total live births.¹³ Such increases would be the probable situation if contraception and induced abortion were not available. A number of factors combined to make this the situation through the close of the decade, including location and financial barriers to family planning services, the "pseudo-moral" barrier that unmarried women do not use contraception because they are unmarried and the legal barriers to generally available abortion. This situation, however, has changed dramatically since the turn of the decade. A number of states have enacted liberalized abortion laws or have had restrictive laws set aside by the courts,¹⁴ states having restrictive birth control laws have seen them successfully challenged in the courts,¹⁵ and family planning and abortion clinics have sprung up under both official and voluntary auspices. Additionally literature on contraception and abortion is both more available and more useful.¹⁶

Thus two major factors contributing to illegitimacy rate, control over conception and control over gestation, are now volitional. Women have the option of conceiving or not, of aborting or not. The effect on the birth rate in general is clear.¹⁷ It was 10% lower in 1972 than for 1971. The effect on illegitimacy rate is more difficult to ascertain, though such evidence as exists indicates a similar situation.

In an analysis completed after two full years' experience with New York's liberal abortion law it was concluded that "there has been a sharp decline in fertility in New York City--sharper than for the

TABLE 5

Estimated Illegitimate Live Births
1969-1972
(in thousands)

	<u>Total Births</u>	<u>Total Illegitimate</u>		
		<u>.7% Increase</u>	<u>.4% Increase</u>	<u>.1% Increase</u>
1969	3,571	371.4	360.7	349.9
1970	3,718	412.7	390.4	368.1
1971	3,559	427.9	387.9	355.9
1972	3,256	407.0	367.9	328.9

Source: National Center for Health Statistics
Monthly Vital Statistics Report, Annual Summary 1970, 1971
"Births, Marriages, Divorces and Deaths for 1972"
Illegitimate live births, author estimate.

rest of the nation...There has been an even greater decline--reversing a long-term trend--in illegitimacy."¹⁸ Using data on residents of New York City, Tietze finds for women with no children a ratio of 1,000 abortions per 1,000 first births conceived out of wedlock. Eliminating those women whose pregnancy is legitimated by marriage after conception (that is, considering the woman's marital status at the time of abortion or birth) the ratio of abortions to first births of unmarried women is 1,500 to 1,000. Thus he concludes that

legal abortion has been a major factor accounting for the unprecedented decline in the number of illegitimate births in New York City in 1971 (a drop from 31,900 to 28,100--or nearly 12%)--in the first year-to-year decline reported since 1954, when such records first were kept.¹⁹

Other factors reported in the New York City study, when considered in the context which Cutright's indicators of decline in illegitimacy rate, suggest that the reported down-turn in illegitimacy will continue.

Thus, though based on only indicative evidence, it appears that because of availability of abortion and contraception illegitimate live births will not continue to increase, but should stabilize or reverse in proportion relative to total illegitimate live births.

Table 6 presents a recalculation of illegitimate live births in high mid and low estimates, based on varying situations of proportion of illegitimate to total live births.²⁰ The probable actual situation lies somewhere around the mid estimate, especially for 1970 onward. Reported surrenders of children to agencies for adoption, a topic to be discussed next, dropped beginning in the latter portion of 1970 and have continued downward since. The aggregate estimates for both mid

TABLE 6

Estimated Illegitimate Live Births,
Corrected by Year for Availability of Contraception and Abortion
1969-1974
(in thousands)

<u>Year</u>	<u>Total Live Births</u>	<u>Total Illegitimate Live Births</u>		
		High	Mid	Low
1969	3,571	371.4 (10.4)	360.7 (10.1)	349.9 (9.8)
1970	3,718	412.7 (11.1)	390.4 (10.5)	368.1 (9.9)
1971	3,559	412.7 (11.6)	380.8 (10.7)	352.3 (9.9)
1972	3,256	390.7 (12.0)	348.4 (10.7)	319.1 (9.8)
1973	3,000*	366.0 (12.2)	315.0 (10.5)	285.0 (9.5)
1974	2,750*	335.5 (12.2)	283.3 (10.3)	255.8 (9.3)

Sources: Table 5; *Author Estimate.

Yearly proportion of illegitimate to total live births in ().

and low conditions reflect such a down-turn. In any event such data as can be reasonably marshalled does suggest that the various factors which seem to effect the rate of illegitimacy, especially as related to control over conception and control over gestation, are now functioning to decrease both rate and total numbers of illegitimate live births.

Surrender as a Definition of Supply

A third major component of the 'supply' of potentially adoptable children is the number of children accepted by adoption agencies for placement. Of the various possible indicators of supply this is the most restrictive. Surrender refers to the legal surrender by the biological mother of a child. Typically this involves placing the child under the guardianship of the agency to which surrender is made. In a general sense placement by independent means also entails surrender. However, independent placements involve both a decreasing number and proportion of all adoptions involving non-relatives. In 1971, the last year for which data is available, independent placements totaled 17,400 children, 21% of the total non-relative adoptions. This is a decline from 22,700 children and 47.2% of total non-relative adoptions in 1957. Thus the 'supply' definition in terms of surrender is best gauge by the number of children accepted by agencies for placement.

Not all children are accepted by agencies for adoption. There is limited evidence regarding the proportion turned away, though one study completed in the District of Columbia in 1966 showed that only 38.9% of women who made requests to adoption agencies for counseling relative to giving up a child for adoption were accepted. (The proportions by

race were: White 44.5%; Black 23.7%).²¹ Even though agencies might not be accepting all possible surrenders they had, until 1970, been accepting an increasing number of children for adoption. Because the basic data on supply by surrender is based on Child Welfare League of America reports on adoption trends, which are issued periodically and had a change in the reporting basis beginning in 1969, it is not possible to do rigorous comparisons. However, the essential shifts can be noted.

Between 1958 and 1967 the number of children accepted by CWLA reporting agencies increased by about 28.6%.²² By race in 1967 there were 71 placements per 100 available white children, and only 31 placements per 100 available nonwhite children.²³

There is no question that the trend based on surrenders from the mid-50s through the mid-60s was one of increasing supply, at least in relation to ability to place. Available children, who exceeded those placed by 25% in 1958, exceed those placed in 1967 by over 50%. However, beginning in the period 1969-70 the supply began to decrease significantly, when measured in terms of agency accepted surrenders. For the CWLA trend agencies the supply of child dropped 6% between 1969 and 1970, and 25% between 1970-71. Comparing surrenders in 1969 to 1971, the supply dropped 30%.²⁴ The decline in supply based on surrenders continued through 1971 and 1972, when the aggregate decrease in supply for CWLA trend agencies was 24%.²⁵ The number of surrenders of nonwhite children seemed to increase. In 1967 they comprised only 16.3% of available children.²⁶ By 1972 nonwhite children had increased to 22.1% of all children accepted for placement.²⁷ Indeed between 1969

and 1970 the supply of nonwhite children expanded by 24%, though from 1970-1971 it remained constant.²⁸ From 1971 to 1972 the supply of nonwhite children decreased by 25%, parallel to the total supply.²⁹

Summary on Supply

There are then three definitions of supply. The broadest of these would include as supply all children not living with their parents or under their sponsorship. Based on the 1970 census this calculation of supply included approximately 2.4 million children. A sub-set of this definition includes only those children in this who are receiving some form of public service. They number 425,400 in 1970.

A second definition of the supply of children for adoption is the annual number of illegitimate live births. This number changes in response to a number of factors, most directly the availability and use of contraception and abortion. Though estimates suggest that the number of such children constituting the supply is now steadily decreasing, a 1970 estimated amount for this supply was 390,400 children.

The third and most restrictive definition of the supply of children for adoption is the number of children surrendered to adoption agencies for placements. There is no data presenting such a figure in aggregate amounts. Child Welfare League of America data on selected trend agencies suggests that this supply is decreasing. If the number of placements in a year by agencies is taken as an order of magnitude figure for supply by surrender, the supply in 1970 was roughly 78,500.

DEMAND

It is difficult to determine generalized demand for adoption because adoption demand has not been allowed to develop in a "free-market" situation. That is, one of the thrusts of the adoption professionals has been to curtail adoption through sources other than licensed agencies. Thus, for example, if one were to consider as demand for overseas (primarily Korean) children in the late 1950s and early 1960s only that suggested by inquiries and placements through the established agencies one would conclude that demand was low. However, utilizing data on placements by the Holt program using proxy adoption shows a demand as much as ten to twenty times in magnitude that estimated based on established agency placements.³⁰ Similarly the nature of agency control over supply by virtue of its option to accept or reject the potential surrendered child affects the demand in a general way. Public pronouncements about relative availability or unavailability of children affect the demand, as does the willingness of agencies to accept an application at all. Further, demand is increasingly focused solely on agencies, as both rate and number of independent adoptions have decreased. Therefore given these caveats, the best that can be said for the general estimates of demand to be discussed below is that they are subject to a variety of external forces, most of which serve to understate potential demand.

General Demand

The number and rate of children adopted has risen steadily since its introduction into general use as a child welfare method after the

turn of the century. From 16,000 adoption petitions in 1934 the number rose to 50,000 in 1944.³¹ By 1957 when the current HEW statistical series on adoptions was instituted, there were 91,000 adoption petitions granted. This number increased steadily through 1970 at an annual average increase of 7.2%, to reach 175,000 children adopted that year. The rate per 10,000 child population also rose from 14.0 in 1957 to 21.7 in 1970. Non-relative adoptions generally comprised about 52% of all adoptions from 1957 through 1970. In 1971, however, both rate and number of children adopted declined, the number decreasing by about 3.4%. All of the decrease in 1971 was accounted for by a 7.2% drop in number of non-relative adoption.³²

CWLA trend data show roughly the same proportion in increase in applications as the HEW data shows increase in adoptions. From 1958 to 1967, for example, CWLA trend agencies had a 89% increase in applicants.³³ The increase continued through 1970, which showed an increase in applicants of 7% over the previous year. In 1971, however, applications decreased by 13%,³⁴ and apparently continue a downward trend in 1972.³⁵

Demand by Type: Infant

Traditionally the potential adoptive family is interested in adopting an infant, here defined to be a child under age 1. The proportion of all non-relative adoptions which fits this category has been as high as 88% in 1969, though it dropped 3% from 1970 to 1971 to 84%.³⁶ Median age of adoption shows a steady decline from 1957-1970, reflecting infant placements.³⁷ It is possible to conclude that with the smaller

proportion of infant adoptions and smaller overall number of adoptions in 1971 the demand for infants has decreased. This, however, is probably not the case. Most applicants still have as their initial interest a healthy infant. For example, one family, which eventually adopted a 5 1/2 month old Korean girl in 1972, initially considered adopting thinking "there was a great big warehouse of healthy white infants waiting to be adopted."³⁸ Demand for infants remains high. The decrease in applicants is seen as a selecting out of the process by those families whose only interest is a healthy infant of their own race who have "heard" that the supply of such infants is limited. Some of those whose interest is for infants switch to other than an in-race healthy infant, and consider a trans-racial adoption (as was the case for the family cited above) or another infant with "hard-to-place" attributes, typically medical problems.

Demand by Type: Minority Race

Because of the higher illegitimacy rates and numbers of illegitimate live births for nonwhites than for whites throughout the years, there has always been a large potential 'supply' of such children for adoption. For a variety of reasons many of these children were not even accepted for potential placement. Those who were accepted did not fare well, with considerably fewer homes available per 100 children than for white children. In 1971, for example, when there was an aggregate total of 127 homes approved per 100 children accepted by CWLA trend agencies. The rate by race was 141 homes per 100 white children, and only 79 homes per 100 nonwhite children.³⁹ This is not

to say that nonwhites do not create a comparable adoption demand. Indeed it appears that they adopt at a rate roughly comparable to whites.⁴⁰ Table 7 shows the number of children from minority races adopted from 1957 to 1971. Of particular interest is the increase in non-relative adoption beginning in 1969. Between 1969 and 1971 adoption of minority children as a percent of all non-relative adoptions went from 10% to 15%, an absolute increase of 3,100 children representing a 35% increase in number in two years. Much of this increase in demand is attributable to the increase in trans-racial adoption, notably of white families adopting black children. For example, between 1968 and 1971 the number of black children placed in white families rose by about 350%. (See Table 8.) Opportunity, a program which gathers such data, reported a rise in agencies reporting such placements from 194 in 1968 to 468 in 1971. (In 1972 they began reporting data on a trend basis, which explains the decrease in reporting agencies.) Trans-racial placements went from one-fourth to more than one-third of all placements of black children during the period. As their data suggests, there is a clear increase in demand from both black and white families for black children. That demand extends as well to other minority race children, such as Chicanos, Native American and Puerto Rican.

Demand by Type: Intercountry

There is a small, but clearly growing demand for overseas children, especially those from Asian countries. The experiences of the Holt program in the late 1950s and early 1960s, using proxy adoption, have

TABLE 7Estimated Number of Children from Minority Races Who were Adopted,
1957-1971

<u>All Children of Minor- ity Races Adopted</u>			<u>Adopted by Nonrelative</u>		<u>Adopted by Relatives</u>	
<u>Year</u>	<u>Number</u>	<u>Percent of All Adoptions</u>	<u>Number</u>	<u>Percent of All Nonrelative Adoptions</u>	<u>Number</u>	<u>Percent of All Relative Adoptions</u>
1957	8,200	9	3,900	8	4,300	10
1958	8,600	9	4,100	8	4,500	10
1959	9,200	9	4,900	9	4,300	9
1960	10,700	10	5,200	9	5,500	11
1961	11,400	10	5,500	9	5,900	11
1962	13,300	11	6,300	10	7,000	12
1963	12,700	10	6,100	9	6,600	11
1964	13,500	10	6,400	9	7,100	11
1965	15,600	11	6,900	9	8,700	13
1966	16,700	11	7,300	9	9,400	13
1967	17,400	11	7,500	9	9,900	13
1968	18,300	11	7,800	9	10,500	13
1969	18,800	11	8,900	10	9,900	12
1970	21,000	12	10,700	12	10,300	12
1971	22,000	13	12,000	15	10,000	11

Source: National Center for Social Statistics,
Adoptions in 1971.

TABLE 8

Black Children Placed by Type of Family
1968 to 1972

	<u>1968</u>	<u>1969</u>	<u>1970</u>	<u>1971</u>	<u>1972</u>
Total Black Children Placed	3,122	4,336	6,464	7,420	4,988
In Black Families	2,389	2,889	4,190	4,846	3,231
In White Families	733	1,447	2,274	2,574	1,751
% Transracial (of total)	23.5	33.3	34.3	34.6	35.0
Total Reporting Agencies	194	342	427	468	289

Source: Opportunity Survey, 1972.

already been recounted. After the artificial depression in demand created when the proxy adoption method was curtailed in the early 1960s under agency pressure, interest has recently revived. Table 9 presents data on immigrant orphans admitted to the United States, based on Fiscal Years beginning with FY 1966 (ending June 30, 1966). In that time period the number of immigrant orphans increased by 79%, while the number coming from Asia increased by 141%. Those coming from Korea increasing by 241%, and represented over half of the 1972 total. With the steady increase in interest in Asian children, especially from 1969 to 1972 when the rate of increase ranged from 17-27% per year, it would appear that demand for intercountry adoptions has still to be met, and is controlled only by the decisions of the governments involved. Thus the recent interest in Vietnamese adoptions is likely to increase dramatically the number of such children admitted to the U.S. for adoption, presuming that the U.S. and Vietnamese governments agree to the immigrations.

Demand by Type: Older

The 1971 increase in proportion of the total adoptions in which the children were 1 year and over suggests an increasing interest in these age groups.⁴¹ Though children age 1 and under 6 had comprised about 10% of the total number of non-relative adoptions for several years, the increase to 13% in 1971 represents an 8% rise. Even more impressive is the increase in placements of those 6 years and under 12, which went from 2% to 3% of the total, a 50% increase. Most impressive of all was the increase in proportion of those age 12 and

TABLE 9

Immigrant Orphans Admitted to the United States
FY 1966 to FY 1972

	<u>1966</u>	<u>1967</u>	<u>1968</u>	<u>1969</u>	<u>1970</u>	<u>1971</u>	<u>1972</u>
Total All Countries	1686	1905	1612	2080	2409	2724	3023
Percent Increase	-	13.1	-15.4	29.1	15.8	13.0	11.0
Asia	879	881	953	1155	1349	1672	2114
% Increase	-	-	8.2	21.0	16.8	23.8	26.6
Korea	436	478	515	746	845	1174	1585
% Increase	-	9.7	7.0	45.0	13.3	38.9	35.1
Vietnam	49	47	67	49	89	89	119
% Increase	-	-4.1	42.6	-26.8	82.0	-	22.5
All Others	807	1024	559	925	1060	1052	909
% Increase	-	26.9	-46.5	65.8	14.6	-.08	-15.8

Source: Annual Reports, U.S. Department of Justice, Immigration and Naturalization Service.

over. For the several years prior to 1971 children of this age had comprised less than 0.5% of all children adopted. In 1971 they were 1%, an increase over 100%.

Demand by Type: Other "Hard-to-place"

Presently there is no national data available on other types of "hard-to-place" children. It is reasonable to assume that among the increase in placements of older children were several also classed as emotionally disturbed, medically handicapped, mentally retarded, sibling groups, etc. There is some data from the Massachusetts Adoption Resource Exchange which suggests that demand is increasing for the full range of types of "hard-to-place" children. As shown in Table 10, placements in which MARE assisted have increasingly included children in other "hard-to-place" categories. The distribution by age at placement has shifted, with a dramatic increase in number and proportion of older children being placed. The increase in placement of white children reflects the increase in "special needs" placements. It is interesting that FY 1972 is the first year for which statistics on physical handicap, emotional handicap and retardation are reported. This addition is explicitly noted in the FY 1972 report as an expansion in demand, indicating that children with these characteristics "were not a significant statistics in 1971."⁴² In addition to data on placements, MARE reports on the number of families registered with an interest in "hard-to-place" children. As shown in Table 11 the number of families has steadily increased, as has demand for children with other "hard-to-place" characteristics.

TABLE 10

Placements Through
Massachusetts Adoption Resource Exchange (MARE)
By Type and Year
FY 1969-1972

	<u>1969</u>	<u>1970</u>	<u>1971</u>	<u>1972</u>
TOTAL	63	149	173	152
<u>By Age</u>				
Under 1 Year	19	53	75	28
One year, Under 6 Years	39	75	66	70
Over 6 Years	5	21	32	54
<u>By Race</u>				
Black	5	33	47	38
Black/White	36	63	68	40
White	17	40	52	69
Race Other Than Black or White	5	13	6	5
<u>By Sex</u>				
Male	32	74	99	89
Female	31	75	74	63
<u>Special HTP</u>				
Physical Handicap	NA	NA	NA	14
Emotional Handicap	NA	NA	NA	10
Retardation	NA	NA	NA	5
<u>Sibling Groups</u>	NA	NA	NA	12

Source: MARE ANNUAL REPORTS, 1969-1972.

TABLE 11

Families Registered with MARE for "Hard-to-Place" Children
By Type and Year
FY 1969-1972

	<u>1969</u>	<u>1970</u>	<u>1971</u>	<u>1972</u>
Black homes for black children	22	30	62	53
White homes for white children	52	81	95	127
Homes for older children	23	24	61	40
Homes for special needs children	8	18	70	58
Homes for sibling groups	4	10	29	48
TOTAL	109	163	317	326

Source: MARE Report June 1972.

Similarly the proportion of type of adoption by the Massachusetts sample of HTPs shows a decrease in adoption of black children, an increase in oriental, and older on the part of "recent" adopters (since June, 1970). (See Table 19) It should also be noted that several of the "pioneers" have adopted more than one "hard-to-place" child. When that is the case the more recent child is less likely to be black, and more likely to fit a different category.

Summary on Demand

Potential demand is difficult to ascertain, because traditional definitions of acceptable adoptive families have excluded large portions of the population. Measured by type of child--infant, minority race, intercountry, older, and other---demand appears to be large and growing. Since changes in practice and criteria are only recent, it is not possible to accurately assess how elastic the demand is.

BUREAUCRAT CONTROL OF SUPPLY AND DEMAND

In practice both demand and supply seem to be directly controlled by adoption workers. No adequate assessment of demand is currently possible because traditional definitions of acceptable adoptive families have served to exclude much of the population from the adoption system.

Worker control of supply is even more demonstrable. Of three possible definitions, the most restrictive is that used in adoption practices, namely surrender. Based on comparison of the 1970 potential supply, the surrender definition used by adoption workers provides a supply 1/5 the size of the supply as defined by number of illegitimate

TABLE 12

HTP Children Adopted by Type
Massachusetts Sample
By Percent

	<u>Pioneers</u> (N=44)	<u>Recent</u> (N=32)
Black or mixed	70	44
Oriental	7	22
Indian	2	0
Older	7	19
Physical disabilities	2	0
Medical	0	3
Multiple HTP attributes	11	12

live births, 1/6 the supply as defined by residence apart from parents (with public support) and about 1/30 the size of the supply as defined by residence apart from parents (regardless of source of support.)

Further in the past several years the supply as measured by surrender seems to be decreasing. An analysis of this decrease in supply suggests yet another area in which the need to create a situation tending toward bureaucratic stability has affected the actions of workers in the adoption system.

A number of hypotheses can be offered to explain the decrease in supply by surrender. One is to attribute it to a decrease in the potential pool created by illegitimate live births. It has been suggested that in the latter 1960s, when abortion at demand was in only limited availability, white women were more likely to make use of that option. Thus there would be a decrease in surrenders of white children because of a decrease in the pool of white illegitimate live births. With adoption being abandoned as an option by white women, black women could make greater use of it. Thus the number of black surrenders would be expected to increase. In fact in the period 1969-1971 that did occur. From 1971 on, however, with greater availability of abortion on demand to both white and black women surrenders declined at the same rate. However, the decline in surrenders is not accompanied by any comparable decline in estimated illegitimate births. For example, using data from Table 6, even if the drop were from the estimated 1970 High to the estimated 1971 Low number of illegitimate live births the decline would be only 12.4%. Only in the case of a

drop from the 1971 High to the 1972 Low would (22.3%) decrease in illegitimate births roughly equal the CWLA reported decline in surrender rate for those years. It does not seem likely that such a precipitous drop in illegitimacy rate would occur. However, even if such a drop were to occur, and even if adoptions of all children born out of wedlock (non-relative and relative) declined again by 8% between 1971 and 1972, the 93,000 children so adopted would still account for only 28.1% of all illegitimate live births in the 1972 low estimate of 319,100.⁴³ Therefore even in a situation of declining illegitimacy rate the aggregate number is of sufficient dimension as to provide a supply more than three times the reported number of adoptions.

Thus a second explanation for the decrease in surrenders is that biological mothers are choosing not to surrender the child. One agency reports that over the past few years the surrender rate in its un-wed mothers project has dropped from 75% to 25%.⁴⁴ Though the 25% surrender rate is 1973 data, if it were applied to the low estimate of 1971 illegitimate births on the assumption that potential agency contact existed for each such birth approximately 88,000 surrenders would have been made, which exceeds the approximately 60,000 infant placements made in 1971 with non-relatives.⁴⁵ Thus on this basis potential supply is nearly 50% greater than demand.

It is unlikely that each unmarried mother had an opportunity to decide whether or not to surrender her child to an adoption agency. This suggests the third explanation for decreasing supply, namely agency practice regarding availability to surrender. Though the

evidence is at best fragmentary, it does seem to suggest that at no time did agencies aggressively make themselves available for surrender. Surrender for adoption seems to have been a way in which proper young white women had their illegitimate children taken care of without embarrassment. For example, though there was a steady increase in proportion of non-relative out-of-wedlock adoptions to total illegitimate live births from 1957 through 1966, in no time did it exceed 23.0%. (See Table 13). Indeed from 1967 onward (including mid-estimates for 1969-1971) the proportion dropped steadily to the 1957 level. Whether the decrease is intentional, or the consequence of unintended actions cannot be readily determined. Based on impressions reported by agencies, some argue that a general pattern began around 1969-1970 of young unmarried women keeping their babies. However these impressions may be related to a decrease in surrender of white babies especially, as agencies have typically been oriented to serving a white clientele.⁴⁶ Even if that is the case a substantial proportion of the possible population does not choose to contact the agency to begin with (24% of whites and 89% of non-whites according to a 1966 study), and of that number which does make initial contact a substantial proportion is turned away (55% of whites and 76% of non-whites.)⁴⁷ Even if such conditions continued unchanged in 1971 (that is, no improvement in receptivity to a non-white clientele) agencies should have had roughly 5,500 more infant surrenders than even the most generous reading of the data shows. (See Table 14). The estimated 65,250 surrenders is roughly the same as one derived by applying the 1971 proportion of

TABLE 13

Non-Relative Out of Wedlock Adoptions
and Total Illegitimate Live Births
1957-1971

<u>Year</u>	<u>Non-Relative Out of Wedlock Adoption</u>	<u>Total illegitimate Live Births</u>	<u>% Adoptions to Illegitimate Births</u>
1957	37,700	201,700	18.7
1958	38,700	208,700	18.6
1959	40,000	220,600	18.2
1960	44,500	224,300	19.9
1961	48,000	240,200	19.8
1962	50,300	245,100	19.7
1963	55,200	259,400	21.4
1964	59,400	275,700	21.4
1965	64,400	291,200	22.1
1966	69,300	302,400	23.0
1967	72,800	318,100	22.8
1968	75,900	339,200	22.4
1969	79,100	360,700*	22.0
1970	78,500	390,400*	20.0
1971	72,000	380,800*	18.6

Source: National Center for Social Statistics
Adoptions in 1957-1971
Illegitimate Live Births Tables 4 and 6

*Mid-range estimates.

TABLE 14

Estimate of Surrender Potential by Race
1971

Low estimate of illegitimate live births	352,300
Estimate by race - white	176,000
- non-white	176,300
Surrender potential, ¹	
White Total x .76 agency contact x .45 acceptance =	59,400
Non-white Total x .11 agency contact x .24 Acceptance	4,650
+ bonus 25% (CWLA trend increase)	1,200
Total Surrenders	65,250
1971 Estimated non-relative infant adoption ²	<u>59,700</u>
Excess ³	5,550
	or
	17,550

¹Based on Wachtel, p. 100. The ratios were tested against 1966 data and found to be proportionate, though underestimating total probable infant supply.

²1971 Infant Adoption - Adoptions in 1971

³Possibly underestimated as 1971 non-relative infant adoption includes those made by independent placement. If this 21% were subtracted, the excess would go up by about 12,000.

out-of-wedlock adoptions to illegitimate live births to the 1971 low estimate of illegitimate births. Thus for some reason apparent surrender rates are below even what a conservative estimate would hold.

Perhaps the best possible explanation for the decline in surrenders despite a constant or increasing number of illegitimate live births relates to the long-term trend beginning in 1958. In that year there were 158 applications per 100 available children, a situation which allowed agencies to function evaluatively, and with relative stability.⁴⁸ Over the years through 1967 the number of applicants about doubled, while the number of children available about tripled.⁴⁹ Thus by 1967 the number of applications for 100 available children was 104.⁵⁰ Having a rough equation of children and applicants removes a condition necessary to the traditional evaluative approach, namely that someone must choose from among an excess of applicants those families who will receive children.

Having an excess of applicants over children had meant that in order for a given family to successfully get through the adoption process, it would tend to acquiesce to the worker conceptions of role and process. This acquiescence increased the confidence of workers in the manner of their functioning and the validity of the general approach. It was, in short, a situation tending toward bureaucratic stability. Thus the reaction to a situation of equation between available children and parents was to attempt to recreate the situation of excess. A situation of excess of families to children can be achieved in two ways. One is recruitment of more families. However,

this would have the effect of making family participation more voluntary, thus increasing their confidence and limiting their willingness to acquiesce to worker definitions. This would not recreate a stable situation. Thus agencies are unlikely to use recruitment to create an excess. The other way is to decrease acceptance of surrenders. This is more easily accomplished. A variety of policies which an agency can institute can have the effect of refusal of surrender, such as requiring participation of the biological father, making eligibility for service contingent on the biological mother contacting the agency prior to the 8th month of pregnancy or encouraging the mother to keep the child. Outright refusal of surrender is also a possibility.⁵¹

Thus it seems reasonable that for reasons of bureaucratic stability agencies began decreasing the rate of acceptance of surrenders, long before the decline in rate or absolute numbers of illegitimate live births and before the trend toward mothers keeping the children. This policy change occurred primarily as a means of reasserting worker conceptions about the proper approach to the adoption process.

CWLA data would appear to confirm this conclusion. The number of children accepted declined much more rapidly than the number of applications accepted. Between 1969 and 1970, for CWLA trend agencies the number of applications was up 7%, while surrenders declined by 6%. The 1970 to 1971 drop in children was 25% compared with only 13% for applications. Overall from 1969 to 1971 the applications dropped only 6.3%, while the children accepted dropped 32.3%. That workers were able to reassert the evaluative control is shown in the decreasing rate

of approved to applying homes, which dropped from 70% in 1969 to 60% in 1970.⁵² Home approval also declined. In 1970-71 homes approved declined by 20%, and from 1971 to 1972 homes approved declined by 43%.⁵³

Chapter 7

THE PRE-CONTACT PHASE

The pre-contact phase is that time prior to a family's initial formal contact with the adoption system. Because it is not part of the formal process it is not often considered. There is little literature or research on what either families or agencies do during the period. Thus there is little to refer to for answers to questions such as, What prompts families to think about adoption in the first place? What gets them to move from general consideration across the threshold of an agency? What sources of information are important? How do families find their way to a particular agency? What do agencies do to prepare for the initial contacts? How do agencies define their "market" of potential adoptive families? How do they reach this market in the pre-contact phase? It is unfortunate that so little is known about this phase. Evidence presented here shows that the initial contact phase is crucial. This chapter presents a modest inventory of the issues addressed by agencies and families in the pre-contact phase. As will be the case for the discussion of each of the phases of the adoption process in this section, the pre-contact phase will be considered from the point of view of the family, differentiated between 'early' and 'later' HTPs; and from the point of view of the agency, again attempting to differentiate between the situation during the watershed years, at the present. Of special interest will be the changes resulting from the increased placement of heretofore "hard-to-place" children.

THE FAMILYThe Experience of Early HTPs

There is no simple classification of the pre-contact experiences of the early HTPs. There are few common paths in the contemplation of adoption, few common promptings across the threshold. The sources of information are disparate, and of uneven utility. There is no typical length to the pre-contact phase. Of the 20 early HTPs studied, for 10 the phase was long, and for the other 10 it was short (using about 6 months as the break-point.) Not surprisingly for 3 of the 4 non-bios, the phase was short. Second, regardless of the duration of the phase the families did carry on what can be characterized as an extensive consideration of their family form and hopes, with intensity roughly interchangeable with duration. Insofar as information seemed available and/or relevant, families made use of it in preliminary determinations about family formation and expansion patterns, values by which decisions were to be made, their ability to include a "hard-to-place" child (or children) in the family and related issues.¹ Third, no matter how good their understanding of themselves and their motivations, early HTPs were woefully uninformed about the adoption process itself. As will be described this batch of information had both beneficial and detrimental consequences. But it is evident that the sorts of things families consider are different when they have a more complete and accurate picture of adoption. Generally early HTPs accepted as at least probable the prevailing myths, since that was the only information generally available. More important families proceeded

on the belief that they had something to give, and that the adoption system, whatever its mythical legacy, would probably treat them benevolently. Early HTPs, then, were thoughtful about themselves and their hopes for their families, and expected the best of the adoption system.

In retrospect, most of the HTPs were surprised that the notion of adopting occurred to them, and that they so readily accepted it. Most, of course, had children biologically, and thus had already met the traditional expectations regarding family formation. In only two families was there any background of personal contact with adoption or foster care; in one family the husband was an adopted child, and in another family the wife's parents had been foster parents. Add to these two the four non-bio families, for whom adoption is a traditional societal expectation once infertility is determined, and there are only 6 of 20 families for whom there is some obvious reason for contemplating and accepting the notion of adoption. For the remaining 14 families the source of the initial idea was very much a matter of chance. Just how much a matter of chance this can be was described by one family:

We wanted another kid, and I was about to go off The Pill. Then I read an article in Good Housekeeping or somewhere about Indian kids needing adoption and I said well let's just do that instead. And we did.

This spontaneous response is more typical of families for whom the idea first arises through the media. The often sentimental qualities of the publicity, especially as encountered by early HTPs, often stirred a romantic response.

We first thought about it because of an ad in our church bulletin. There were descriptions of the children which made them all very attractive, intelligent, talent, and like that. And of course then the kids described were all babies. Maybe by today's standards the approach would be out of date, because there was so much of this 'the child is going to be a product of the parents' emphasis. But it attracted us.

Another family responded to a TV program which was presented at about the same time as a newspaper feature article appeared.

When we saw this program and read the article we said, why should we have biological kids when there are so many kids available who need a home?

For yet another family the response to a Sunday newspaper feature article was immediate.

We answered an ad, that's exactly what we did. It was a special article on children who wait. We had a very emotional response. We're the perfect example of people who respond to this kind of advertising for the kids. It just suddenly occurred to us that our house was big enough for another kid, and we thought our hearts were big enough too.

Another family had friends with biological children who had adopted in-racially, also so the idea of adoption was not totally remote.

We had four biological kids at that time. Several magazines came out with articles. We started asking each other, wouldn't this be more appropriate? because we wanted more kids. We assumed we'd get "hard-to-place" children, and weren't sure what reception we'd get, but decided to begin anyhow.

For many other families, though, the period of time between the initial idea and serious consideration of it was considerable. Very often for such families the idea occurred to either the husband or wife even before the marriage, perhaps as the result of a childhood situation or a discussion or course in college.

I think there's a whole bunch of reasons we first started thinking about it. When we were first thinking of getting married I had a dream about giving birth to a deformed child. My husband couldn't really handle that possibility at first, but then he saw the movie 'A Child is Waiting,' about a residential school for mongoloid children and decided that it would be ok for us. Then when we were first married some friends were foster parents for 2 boys, who were about 8 and 10 and really made a difference for them. Then, when I was in social work school I saw the movie 'Superfluous People,' which had a scene of rows and rows of bassinets of kids in New York hospitals without homes. I think that's when we decided to adopt, though we didn't do it for a couple of years.

In this same family the husband also identified several reasons why adoption seemed to make sense.

When I was a teenager my grandparents worked in a children's home in New York State. My family used to visit there often, and once we talked about adopting one of the kids, a 5 year old who had some sort of problem with his legs--he had to use braces, anyhow. I guess that also fits with our family having sponsored a Japanese girl during her university studies in the U.S. in the late 1940s and early 1950s. We always called her our sister. So I suppose it wasn't all that unusual. I've always thought that someone who was aware that a problem existed should do something about it, so when my wife told me about the Superfluous People movie it just seemed to make sense that we should think about adopting and do it eventually.

In a few cases the idea of adopting a "hard-to-place" child grew out of a family's background or professional training.

We had decided we'd adopt a child who was retarded because both of us had done work with retarded children. Our experience was at institutions where kids, although retarded, could benefit much more by being in a home. We had planned to go the usual route of a couple of biological kids and then adopt. But in the course of our work it just happened that there was this child and so we started.

Just as the source of the initial idea to adopt varied widely for the early HTPs, so also the topics and nature of discussion relative to proceeding with adopting varied considerably. Again the particular

topics considered seemed in part a matter of chance. With information on adopting and especially on adopting "hard-to-place" children in relatively short supply most early HTPs had to invent for themselves the issues which they felt might be most pertinent. For those whose pre-contact phase was short and who adopted near the end of the "early era" of the movement to adopt the "hard-to-place," there was a greater likelihood that they would encounter one or another of the families who had already completed such an adoption. Thus a family who adopted in August of 1969 first began thinking of adopting after going to a community information fair held in the local high school gym at which the Open Door Society had a booth. They talked with the ODS family in the booth, and continued the contact intermittently for the year or so prior to making the initial formal contact with an agency. This was one of the few instances in the 20 early HTP families in which the informal ODS publicity network worked in advance of an initial family contact with an agency or MARE.

For most families the idea was nurtured around a relatively limited number of topics, mostly those which the family thought might be the crucial ones to know about for themselves and/or the agency. One family was not certain about the differences in parenting a child other than one biologically reproduced.

We thought it would be beneficial to take in a multi-racial foster child first. We wanted to see what it would be like, before making a lifelong commitment. We used other excuses, like adoption was too expensive, but what it really was was that we weren't sure.

Another family spent time contemplating the reaction of the grandparents, especially since the "hard-to-place" children at this point were more likely to be black.

We had talked about adopting trans-racially, because we'd heard about it from a social worker friend. In our priority of values we were mostly interested in being parents, not how the child matched us. We did talk a lot about it in terms of our parents, and their reactions and what this may do to some of the sustaining and supportive relationships we had. We were 100% accurate on how we assessed our parents' reactions. His mother just wanted us to have a child. His father said, "I'd expect something like that of you," because of (the husband's) expressed social viewpoints. My parents were negative. My mother was pretty much quiet. My father was more vocal, though at the time he honestly believed he wasn't prejudiced, that he honestly felt he was doing us a favour by pointing out the difficulty our kids would have with dating for example.

For other families the focal point of the discussion was the difference in the child, notably in terms of race.

I had "mothering" concerns--could I love a child who was black or yellow or red? It was like in South Pacific--you've got to be carefully taught. Could I overcome that?

Another family talked about working with black children in a Head Start program, and how that made a difference in being able to consider a trans-racial adoption.

Working in Head Start really got me over the racial barrier, to the point that I individualized the 60 black kids. Working with the neighborhood people enabled me to find the uniqueness in them as individuals.

Another question considered was the ability to handle discrimination.

In one family the husband reflected on that saying

Perhaps it was because my father was a minister. Because we were PKs (preacher's kids) we had to observe a different standard of behavior than other kids. So I became aware of the social pressure, the discrimination early, because it

affected what I could and couldn't do. Maybe that's why I felt we could handle the discrimination issue.

Few couples spent much time contemplating their general abilities as parents. This is expected, as most already had biological children. But even with the non-bios the parenting ability did not take up much of the time in pre-contact discussions. And in no case was the difference in problems stemming from adoption per se (as opposed to adoption of a "hard-to-place" child) identified as a pre-contact topic of discussion.

The other frequent area of discussion in the pre-contact phase was how to handle the agency. The source and accuracy of information about agency procedures varied widely. One family talked with their minister, who had some knowledge about adoption. Another family, which responded to a newspaper account, simply called the listed number, expecting from the tone of the article instant processing.

We called and got forms. Then we got referred from MARE to an agency. We didn't realize MARE wasn't an agency. Then we had to wait on the agency. By then we were wondering whether they wanted families or just pieces of paper, and didn't know who to ask to answer that question!

Another family put it this way:

Look, I work with people. I hire and fire every week. I know what it means to size up somebody. So why should I go in hat in hand and wait for them to ask bumbling questions. I figured I'd size them up, and if they weren't sensitive to get through to me as quickly as they should be I'd run the conversation, and I did.

One family in which both husband and wife had a background in social work considered the issue in detail.

I'd been in community organization. I'd organized groups by saying things like, why should somebody downtown behind a

desk make decisions which vitally affect your life. And we both done some casework. So we knew that kind of thing. So we said, how are we going to handle this? And decided that we'd rather be straightforward, unless that disrupted the worker's sense of order. If that happened then we'd be Mr. and Mrs. Perfect. Well, it happened and that's what we had to do.

Another family said

It never occurred to us that we wouldn't be accepted. We sort of approached it the way you do getting a loan when you've got lots of money in the bank. You figure you'll tell them what they need to hear, cause it's their responsibility to get that, it's necessary to be sure everything is ok. So we just decided to answer what they asked.

Though the matter of criteria which an agency might apply was discussed only infrequently, it appeared that the early HTPs mostly assumed that the prevailing notions about income, residence, education and the like were the standard, but that because they met such criteria they were essentially irrelevant. Indeed as one family put it

Even though we obviously met them, those things were irrelevant. We felt we had something to give, that we were a service to them, so that there wasn't any way they could reasonably say no.

The Experience of Later HTPs

The differences between early and later HTPs in the pre-contact phase are easily discerned. Though the range of issues considered during pre-contact remained generally constant, later HTPs were more likely to be better informed about them and cover more of them in each family. Much of the difference is traceable to the emergence of the Open Door Society and its geographically based recruitment and information efforts. ODS recruitment efforts also tended to be a more standardized source of the initial idea, whether through the more extensive publicity or through the less formal, chance contacts of families.

Half of the later HTPs indicated that they had some contact with an organized adoptive parents group during the pre-contact phase. (Not all of the later HTPs interviewed were in the Boston area during their pre-contact phase.) In most cases the contact came via some form of publicity, though in a few cases it was through chance meetings at parties or similar informal situations. Typical among later HTPs for whom the initial source was ODS-inspired publicity was the following family.

We had seen in the paper the term "hard-to-place" children. My husband and I had two biological children and had always assumed we'd have three or four biological kids. But when we saw that about "hard-to-place" kids we decided maybe that would be a better way to get our third child. After we had talked about it a few months we saw a picture in the paper of an ODS family. My husband brought it downstairs to me and said, Here's someone else like you. A little while later he said, Don't you think we ought to sit down and decide how we're going to adopt our third child. It was a process of elimination then. The older child seemed more difficult than a baby, and we thought we really wanted a baby. A handicapped child made my husband more nervous, but it didn't sound scary, the thought of adopting a black child. What we wondered was whether we'd be qualified to raise a black child, because we didn't know that much about it. Because we'd seen the ODS family in the paper, I decided to call them up, because even though I didn't know them we'd gone to the same high school and knew who they were. She made it sound simple. Well, maybe not simple, but she told us what was involved with an agency and about the kids. And she recommended an agency and a social worker, who turned out to be an excellent social worker. It's one of those happy stories, no complications!

For this family the media-based recruitment effort provided enough accurate information and interest to enable them to consider the options in advance of actual personal contact with another adoptive family. The personal contact provided the last essential information needed to move the family across the threshold and into the initial contact phase.

The information they received from the ODS family was usefully accurate. As a consequence the family's period of 'anticipatory anxiety' about the agency and its procedures was based on specific and correct information. Thus their expectations about themselves and the agency in the more formal parts of the process better matched the reality, and the family could conclude that it was "one of those happy stories, no complications."

For other families the lead time was somewhat longer, and involved adoptive families (through the ODS area meetings or other means) more directly.

We'd always talked about it, at least the last 3 or 4 years. We had two biological children, and thought we'd have as many kids as we could afford. But we also thought we'd limit the age at which we'd still have them biologically. When our youngest got to be 2 1/2, and we were about at our age limit (which was 30) we seriously thought about adopting instead. And we decided to foster or adopt at our children's age, instead of an infant, to develop a buddy system. I think what got us thinking about it was an ad on TV for foster homes. Then we had some friends who had adopted a black child. They were also Area Chairmen for ODS. We had seen that as a successful placement. One time we were at their house for a party and we got talking about adoption. They showed us the MARE book. In fact that was really one of the first active things that happened, seeing the MARE book and then thinking about their adoption as a successful thing. That became a reference point for us. When you see somebody who has actually done it you say well it's time for us to do something.

For many families, the general availability of more accurate information about "hard-to-place" children brought the discussions of the past with friends, in college courses or bull-sessions, or across the back fence closer to the realm of possibility. For example, the woman in one later HTP family remembers doing a term paper on adoption in her senior year in high school, and another research paper near the end of her college career, this time on trans-racial adoption. The second paper

and the contacts established with ODS in the course of researching it provided the basis for the family consideration of adopting a "hard-to-place" child. Other families recall working in volunteer capacities in social agencies in Roxbury, Boston's South End, Harlem, and the Lower East Side or Washington, D.C., as particularly important. They link the experience of working with black and Spanish-speaking children with their ability to realistically consider parenting a "different" child. Interestingly too among the later HTPs interviewed were families in which one of the parents was or had been an adoption worker. They attributed their personal interest in adopting a "hard-to-place" child to working with ODS.

As the source of initial interest on the part of later HTPs is more definable, so also is the nature and range of discussion about the possibility of adopting. Later HTPs were able to approach this more systematically because of the greater availability of information. They did so independently, using library resources, and jointly, with ODS families. For some the research was extensive.

Probably the precipitating factor was talking to a neighbor who works in an institutional setting for girls. She told us about particular kids needing a foster situation. But we didn't have really accurate information. We weren't sure which way we wanted to go--adoption or foster care. We thought we ought to find out what was available and what was going on. So we asked, and did a lot of reading in the literature, especially on foster care, probably 3-4 months work. We wanted to be able to make a commitment to a child, but to do it in a way that was informed. So we read the literature, and got a good sense of ourselves and what we thought was a good sense of what agencies were all about. Of course what you find out is that what is true at one place isn't at another.

For another family the discussions about adopting were an extension of similar discussions about their marriage.

We'd talked a lot about adoption before we got married, because we had a lot of trouble from our in-laws about our inter-faith marriage. So when we started thinking about adopting a "hard-to-place" kid a lot of the questions were really the same. And by that time they'd been kind of worked out.

Another family's involvement in ODS during the pre-contact phase prepared them for working with the agency.

When we first went to the agency we were able to walk in and say, OK this is what we want to do, we know all about the adoption procedure, we know the kids who are available and we're interested in a "hard-to-place" kid. We could be very positive from the beginning, because we knew how well it could work. We'd talked with ODS families, and been in their homes. There is nothing like seeing it to make you really think about how it would be in your family.

This same reality factor also had an affect on the "puffy" publicity given to the movement to adopt the "hard-to-place." Families who had adopted in the early years were telling both the agencies and the later HTPs with whom they talked what the reality was. Thus sentiment and romanticism was increasingly replaced by the knowledge of children as human beings.

We had some friends going to an adoption agency. We started thinking about adoption, and talked with them and some others. We were considering adopting a black child, but after talking it over decided that where we were it just wouldn't be fair to the child or us. We weren't ready for it. But we thought we could handle a medical handicap, though of course it depended on the nature of the problem. It would be a long haul--kids are, so we wanted to feel prepared to make that long haul commitment.

For another family the issue was one of the differences between adoptive and biological children.

It was a new adventure to adopt a child. While it is logical to adopt, it never seemed real. You don't grow up thinking about having children by adoption, especially when you know you can produce them biologically. I have a friend who had trouble getting pregnant, and had several miscarriages after having a child biologically. So she adopted traditionally. So I asked her if she found it very different, her relationship between her biological and her adopted child. Would I love my adopted child as much as my biological children? I felt that I would; I had never been put to the test, except through knowing neighbors' children. But I wasn't exactly sure. So I asked her. She said she loved them both as much, that they felt lucky to have an adopted son. I think that reassured me.

There was also a greater realism in expectations and approaches to the agency. In cases where contact with ODS preceded the initial contact with the agency, later HTPs had more accurate ideas about how an agency would operate.

Probably the most help ODS was at that point was in terms of the information we got about agencies. It was good information, especially about personal experiences and why agencies did things. What was helpful was to know that the people we were talking with had gone through it and gotten a child. That made the agency thing more realistic. I could understand things and not be so anxious about what might happen.

THE AGENCY

It is remarkable how little agencies know of what prompts potential adoptive parents to consider adopting, and what sorts of thing potential parents are likely to have contemplated prior to the initial contact with an agency. There exists among agencies, in a general sense, a prevailing notion that parents are a blank slate when they first present themselves to an agency; or, if they are not a blank slate, there is very little which the agency can have to do with the situation of the parents.

Though the literature evidences periodic concern on the part of the adoption professional that "the public" does not really understand adoptions or the adoption process, there is little evidence that correcting this situation has been much of a priority. The demonstration projects which followed the 1955 CWLA-sponsored National Conference on Adoptions had as a partial goal general community education, as well as the major goal of placing more "hard-to-place" (especially minority race) children. Relatively speaking the situation of "hard-to-place" children did not improve much, but the goal of general community education succeeded. Unfortunately what was transmitted was that the general mythology of adoption was by and large true: it involved considerable paperwork, judgment according to hard criteria (income, nature of housing, family stability, general "perfection") infertility, and conformity to worker expectations. This may not have been the message which agencies intended to communicate, but it certainly was the message which came across.²

None of the agencies interviewed carry on an systematic recruitment campaign.³ Most rely on referrals and on informal networks to attract applicants. Agencies generally find their referrals coming from families they have served before, or from the periodic publicity efforts of organizations such as MARE and ODS. From time to time, some of the agencies had initiated or been the lead agency in a media-oriented recruitment effort. However, there was no systematic evaluation of the effectiveness of such efforts in terms of either numbers of inquiries or the qualities and characteristics of the families, especially in terms of making their participation in the adoption process more

effective. Where agencies rely on MARE and ODS for recruitment there are no regular means for evaluating the effectiveness of recruitment, either quantitatively or qualitatively. If an agency does work with MARE it usually participates in the MARE Technical Advisory Board (TAB). TAB, however, meets infrequently and usually must cover an agenda of many items. None of the agencies provided a mechanism for on-going regular contact between the agency (and its staff) and ODS, in terms of the ODS recruitment and education functions.⁴

Thus for agencies there is basically no pre-contact phase. The agency focuses on already interested family, not the potential market. Whatever occurs because of recruitment efforts of a more formal nature (typically undertaken by an adoption resource exchange or an adoptive parents group) affects only indirectly the adoption process as viewed by agencies.

Chapter 8

THE INITIAL CONTACT PHASE

The initial contact phase is the formal entry of a family into the adoption process. The phase includes all orientation aspects of the relationship with the agency. The initial contact phase commences with a personal contact between the family and an agency. Though it need not be, this contact is almost always initiated by the family. The initial contact may be in the form of a letter, telephone call or personal visit. It may be directly with the agency, or it may be through an intermediary such as an adoption resource exchange. Families may also initiate contact with more than one agency. Although there is growing evidence to suggest that a relationship between the nature of the initial contact and the eventual adoption outcome, little research has gone to this point.¹

THE FAMILYExperiences of Early HTPs

If there is any common thread to the experiences of early HTPs it is their willingness to be directed in the process by prevailing agency practices. Almost without exception early HTPs considered it the prerogative of the agency to determine the sequence of events. In return for this the HTPs anticipated that their requests would be handled efficiently, and that their prerogatives as potential parents would be respected. Where conflicts were apparent, especially at later points in

the process, they could often be traced back to this exchange incongruency.

Since agencies rarely make the initial contact, the first step is for the family to find its way to a particular agency. The earliest of the early HTPs accomplished this totally on their own. Many turned to the phone book.

I don't remember what lead up to actually calling. But we decided to, and so I looked in the phone book. I remember some friends talking about X agency, so I called them first. Whoever answered took our name and address and said they'd send an application. We should finish it and then return it and somebody would call us for an appointment. I can remember the funniest part was the reasons for infertility, since we had biological kids. Of course they're smart enough to cross that out now. But then we had to have a doctor's exam on that. Anyhow we filled it all out, sent it in and waited. We waited a few weeks, longer than we thought we'd have to, but it never occurred to call and ask what was happening. We just assumed they'd get to us as fast as possible. Of course we know better now.

Few people mentioned that they received any information about adoption other than a cursory cover letter, and whatever was implied in the application form itself. When the initial contact was of the phone-and-mailed-application format the families never had information other than common knowledge, and the formalities of listing occupation, income, church affiliation, references, community activities and the like confirmed their feelings that these were the essential criteria by which decisions were to be made.

Other families, especially those adopting in the latter part of the 1960s, found their way to a particular agency by referral from an adoption resource exchange. In some cases the contact resulted from media publicity. Thus one family wrote ARENA after reading about

Indian adoption in a national magazine; they were referred to a local agency which eventually made the placement. Other families were referred by MARE to particular agencies. Typically MARE was first contacted because of a newspaper article, or on advice of an ODS member.

While most families had verbal contact by phone and mailed applications in some other cases, usually among those early HTPs whose placement was toward the end of the 1960s, initial contact involved first a group meeting. The initial phone call or letter would elicit an invitation to an initial orientation session, usually held within 2-6 weeks of the contact. The orientation session usually included a description of the agency's procedures, of the children available, of the probable time period from initiation of study until placement, and would also include a time for questions. Interested families would often then be provided with applications (the content of which would be discussed), requested to return them as soon as possible, and told that an appointment to begin the study process would be made soon after receipt of the application.

We had called a couple of agencies, but X agency was the one which responded most to our circumstances. We were invited to a group meeting by letter, which was scheduled about a week after we called. They talked at the group meeting about the kids available. There was a waiting period of 6 months before they could even begin a study for a placement of a healthy white infant. But since we had decided already to adopt a "hard-to-place" child we got our application in the mail the next day or so. The group meeting was helpful. It was mostly on agency policies, and procedures and when a study would be done. They were focusing on the white infant then, but even for families wanting those children it was helpful to know, I think. It allowed people to express

their ideas on adoption, and gave people something real to think about while waiting for their study to begin.

Some families did extensive shopping to get the agency they would feel most content in working with. Though this wasn't frequent the experience of those families who did "shop" is illustrative of the differences among agencies at that time.

We first got interested because we decided we wouldn't have more than 2 kids biologically. But we decided we enjoyed children, and could provide a good family life for some more. We initially thought in terms of Asian children, and even called some agencies about it. We found out how difficult that was, and got discouraged, though I think calling the agencies was how we found out about ODS. We began thinking about black children, and talked some with families who had adopted trans-racially. For six or eight months we were taking opposite sides of the argument, were going to ODS meetings, and to the ODS annual picnic, which was a big thing. It was there that we decided what we could accept. It crystallized the issues because of the reality. You know many adults don't have a picture because of the lack of previous personal experience. The picnic was like lighting the lightbulb. Anyhow we called several agencies and set up interviews. The first one discouraged us because of the length of the waiting period and the paperwork they wanted. At the second we had a group meeting, but were totally turned off by the patronizing attitude of the worker. The third agency we never went to, because I didn't like the tone over the phone. And I wasn't sure about the fourth agency, because they were having a big staff turnover. But they called us back and set up a time to start the study. Since we'd liked their approach we decided to go with them.

If the experience of this family is typical it is because they had a reasonable idea of their interests and strengths prior to the initial contact. The apparent unwillingness or inability of many agencies to recognize and/or capitalize on this was also typical for early HTPs. There were a few instances in which agencies did capitalize on this interest, however. One family reported:

We were at the agency for an orientation session about how the agency worked and so forth. We were getting the kind of information we expected, like we hadn't been married long enough, there would be a long wait, etc. Just as we were ready to leave she said, would you be interested in other than a white infant? We said yes. And right away the formality was dropped; she said sit down I'll show you a picture. And it was 6 weeks total until placement!

Not everyone was able to get past the procedural maze so quickly, especially if the contact was with a larger agency and/or a state agency. In these situations units within the agency exhibited many of the characteristics of autonomous organizations. Thus one family had an initial interest in adopting but felt financially unable to do so. Because of an inaccurate recording of the family's interest on the initial contact form they were listed as a foster care resource for white infants only. Their application was kept within a district office of a public agency. When the family had waited four months without anything happening they contacted the central office of the state agency, which suggested the family either consider adopting or be transferred to the central office foster care roles. The couple agreed to consider either option, but had to watch from the sidelines as the central and district units haggled over jurisdiction. The jurisdictional dispute was finally settled, and a study begun with what was, by that time, a confused and disillusioned family. Similarly another family had responded to a television advertisement for foster homes, but never received a response to its letters or calls. A chance meeting with friends who had adopted rekindled their interest which was then directed to a different agency.

For early HTPs, agency response was highly idiosyncratic. There was no uniform response to this new group of families, whose interests and characteristics clearly differed from those of families with whom agencies were used to dealing. As a result some experiences were good; some quite bad.

Experiences of Later HTPs

Later HTPs also showed a pattern of varied experiences during the initial contact phase. While there was greater agency reliance on the group meeting format (rather than either individual interviews or phone call and mailed application) the degree of satisfaction evidenced by later HTPs varied according to the content of the initial contact phase and to the family's own preparation and knowledge.

There was evidence that the group meeting format was more refined. Some agencies made use of audio-visual aids, with tape recordings or films of available children, or of parents who had adopted, especially those who had adopted "hard-to-place" children. Greater experience with placing "hard-to-place" children enabled workers to anticipate some of the basic questions, and present more relevant information. Under the best of conditions the group meetings drew favorable response, mostly around those issues which related to how a family was prepared for adopting, i.e., the nature of a family's pre-contact phase. Where group meetings were negatively evaluated it was generally because they were perceived as serving only the needs of the agency, especially if the agency was seen as highly evaluative. Families who responded favorably to group meetings were similar to the following family:

We had gone to some ODS meetings, had thought about what kind of child we wanted (under two, happy and not morose) and were ready to get underway. At the group meeting they discussed procedures generally. They tried to explain what it takes to be an adoptive parent, what they looked for. They explained criteria and how long it might take and how much it would cost. They gave an opportunity to ask questions, or alleviate any fears you might have about adoption in general. It was a very positive meeting. The woman who lead it seemed to be very qualified, very open-minded, very understanding. She was enlightened, and positive, so positive to everybody. People had a really wide-range of questions. She made you feel like they didn't come out to check you out to see if you had enough money or had a big enough house or something; those weren't the type of things they were looking for. We signed up right away, and went quickly into it, because we said we would consider a "hard-to-place" child. She didn't push them at the meeting, though. Just let people know about kids who were available. They didn't indicate that people considering "hard-to-place" children would get preference, but we did.

Families were unhappy with the group meeting for a variety of reasons.

Some found it perfunctory, or a waste of time.

We asked people in the field to recommend a good agency. We called X agency on their recommendation. We waited one month for the group meeting. They acted as if they were really booked up for these first meetings, and you really had to wait your turn. After waiting that long the group meeting really wasn't anything. It was mostly they introduced themselves and then opened it for questions. We had read so much that we knew what not to ask. Nobody said much; everybody was too reluctant. They didn't discuss the children available, or their procedures. The social worker herself was so nervous that didn't help. (I think she might have been a student, and was being observed.) She read from cards, and didn't inspire confidence. After the group meeting we were given an application, and then allowed to get into the study.

Others found that what they thought would be informational sessions were emotional grilling encounters.

There were about 30 people in the group, including two black couples, which surprised us. It was sort of interesting, a "what do you expect in your child" thing. Peoples conceptions of personality, specifications, etc. It wasn't as informational as we expected. It was more like the worker was

trying to get something out of each of us, or else we couldn't proceed. They wouldn't give an estimate of the time in the process, and didn't review requirements very well. There was a long wait before we were contacted, but we didn't know whether this was ordinary or not. And we didn't know whether to take a chance and call, since this would be our first child. We later found out our application had been mis-laid for a few months, and that because we would take a "hard-to-place" child we should have been seen right away.

In each case where later HTPs found the initial contact phase satisfactory is was usually because the agency handled the initial contact efficiently or provided clear information on the type of children available.

We had an initial interview with the social worker. She asked us how we had come to our decision and what we thought the difficulties would be (that's when we discussed money!). She explained to us what the home study would be about. She said we could assume that if no problems were brought up that there were no problems, that if she had any hesitations she would mention them. She said she didn't want us to be nervous at any point about whether she would work with us for four and five weeks and then tell us that we were unfit parents. We never did have any difficulty.

Later HTPs also shopped for agencies, especially if they didn't make initial contact via MARE or ODS referral. (MARE or ODS served as brokers limiting the need to shop by centralizing information on agency policy, availability for immediate study, and general procedures.)

We did a brief phone survey of agencies. We got over the phone their intake criteria, fee scale and general approach. From that we decided to visit three. In the first agency the time for home study was longer, and for some reason they were unusually restrictive of things like the mother not working, or fertility. Really hard-nose and rigid. Then we tried a private, non-sectarian agency. To begin with they were very expensive. But it really came down to we couldn't stand them. They were very flexible and didn't have hard criteria, but we felt like we were being patronized, that we owed them something for their being such good people. They were haughty, the way some liberals can be. Then the sectarian agency we ended up with was traditional and conservative. But they were unprofessional, in the best sense-- "warm and motherly." But because we were of that religion we

understood the informal rules, we knew what to say. It was easier to psyche-out the intangibles.

The initial contact phase was still complicated and inefficient for families who began with an agency or worker with little previous experience in doing "hard-to-place" adoptions. Families with an interest in intercountry adoption were put-off because of the problems in paperwork which that would entail for the agency. (Often such families became trail-blazers for both agency and other parents, learning the procedures, immigration paperwork, and related aspects better than agencies.) Families working with agencies with limited previous experience got lost in the agency's dilemma of how to handle it.

We weren't really sure of what type of child we would like to adopt, but because we heard that healthy white infants were in short supply we indicated on the application that we'd consider other children as well. We'd gotten to our agency because some families we knew had adopted through them. (They had adopted white infants.) We applied in November, but didn't hear until May. We think now it's because the agency didn't really know how to handle our interest, because once we started it was clear the social worker really didn't know much about how to get kids other than those from within the agency.

On the whole, however, from the perspective of families the initial contact phase was handled more effectively by the time the later HTPs were involved in adopting. Group meetings allowed more rapid initial personal contact and provided a forum for general reflection on adoption issues without the pressure of the individual family study. However, the advances were not uniform in the adoption field; they varied among agencies, often depending on the extent of an agency's experience with placing "hard-to-place" children.

THE AGENCY

Almost without exception agencies report a preference for group meetings as a means of initial contact. This represents a major shift during the past few years from the use of the phone and mailed application form of initial contact. The primary constraint on using meetings exclusively is the size of the agency's caseload. In small agencies with relatively infrequent initial inquiries it was reported to be difficult to hold group meetings with the frequency considered desirable in order to retain the initial interest of potential adoptive parents. Thus, some agencies still use individual interviews as the form of initial contact if enough inquiries to form a reasonable size group (4 or more families) are not received within a 2-3 week period.

If there is a distinction among agencies regarding group meetings it is that some agencies view them as a means of increasing the ease of processing inquiries, while others tend to emphasize the educational potential which such meetings hold for potential parents.

When couples call in we get their name and address and their area of interest. (If they are interested only in a healthy white infant we tell them we are not accepting such applicants at the present as we have a backlog of studied homes for such children.) We then tell them we'll be sending an invitation to a group informational meeting, which will be held within the next 2-3 weeks. If there is a particularly big demand we schedule meetings sooner. The meeting is informational, to tell the couples what the adoption situation is in general, what it is at this agency and what they can expect from this agency if they put their application here, and for what children they can apply. We tell them that their application has to list precisely what kinds of kids they are interested in. They can include any of the "hard-to-place" children; we urge them to list those with whom they feel they can be comfortable. We tell them they will hear from

one of our workers within a month, after we have had a chance to thoroughly screen the application. The worker then tells them how soon they can start their study. We also give them a chance to ask any questions they might have about the process or the children available.

This agency reported a rather high attrition rate in terms of families continuing on after this informational meeting, a situation shared with other agencies for whom the group meeting is a matter of efficiency for the agency.

There is a middle group of agencies for whom the group meeting serves both efficiency and educative functions. Among such agencies are those with relatively small staffs, with the decision to shift to the group informational format one initially prompted for efficiency's sake, but often retained because of the benefits which potential parents seemed to derive.

In our adoption process we have two group meetings in the evenings. We started doing that to make it simpler for the staff, since there aren't many of us. In the first meeting we talk about what the study consists of, and try to get them to talk about questions which are of interest to anybody who wants to adopt. We began to see that it helps people to see that there are others in the same situation. Recently then we added the second group meeting for those interested in "hard-to-place" children, with more questions coming on those particular children. The application then comes in after the two group meetings. Though we started that to make it simpler we found that meeting in groups was more helpful to the parents. They could find out what a study is, which most families want to know because they're terrified of it; and the meeting could be educational as to the options. Because there were other people there, more questions came out, and about more things. We could also clear up misconceptions, which people were less afraid to ask about, like the availability of kids, the duration of the process and especially about post-placement supervision as a negative or tense thing. We found parents felt a lot better after this.

Another agency which had increased its activities in placing "hard-to-place" children within the previous 18 months began using group meetings.

This agency focused even more directly on the benefits to parents.

In the group meeting we try to help parents to self-exploration and self-evaluation. There is a need to define terms, because often we're not talking about the same thing, especially in terms of various types of "hard-to-place" kids. We can bring in various resource people to help parents understand the many aspects of adoption. The kind of people we use include child psychiatrists, foster care workers and parents, adoptive parents and people who were adopted. We can talk realistically about traumas, reactions, what the adjustment might be like.

This agency reported about a 20% dropout rate after the initial group meetings. Spot checks of some dropouts found that they were convinced they had made a sensible decision after considering themselves and their family situation relative to the children available. The agency also reported that after this initial contact phase they were better able to enter into a working partnership with families remaining in the process.

Finally there is a small but growing number of agencies for whom the initial contact phase is one oriented to general family service. Here the agency proceeds on the premise that it is a resource to families in the process of being created or expanded. As part of this process a family should have an opportunity to reflect on the dynamics of family formation and functioning, especially since the manner being contemplated--adoption--differs from the expectational norm of society. Either outcome, placement or dropping out, is seen as beneficial since families have learned something about themselves. The program of one

such agency interviewed has been described in the professional literature.¹ Others interviewed are beginning to develop comparable approaches.

There were a number of things which contributed to our switch to this new approach. We are also a residential center for children, and wanted places for them to go when they were better, we knew about kids which the system didn't protect, and something about placements which didn't work for older children. We had been involved early in the effort to place black children,² and in that way had gotten into non-traditional things. Then we decided to work with kids 6 and over, and knew that families needed special strengths in preparation for those kind of placements. But probably a crucial factor in changing our perceptions were the supervision groups with those first families who adopted black and older kids. It was really the families who "supervised" the workers. The issues were clarified by these sessions. We saw that it was the families who were the important participants in the process, not the social workers. That was a hard thing to give up. But it was the families who were helping other families in those sessions. The social worker just helped some with the group dynamics, and could offer some professional opinion or bring in other resources. There was a combining of different skills, and the ideas developed interactively. We then began shifting our thinking toward making the family the primary actor in the process, with the agency in a secondary, facilitating role. It took the pressure off us and them, and made the whole process more beneficial.

The agency which initiated this approach reported an initial drop-out rate of 1/2 to 2/3, but as word of their focus spread this dropped to about 1/3. A systematic follow-up on drop-outs was completed. The conclusion was that families were leaving the program for valid reasons relative to the children available.

The initial contact phase evidence considerable change resulting from the movement to adopt the "hard-to-place" child. Where agencies could assume general knowledge on the part of potential families about

how to integrate a "normal" healthy baby into a family, the same assumption could not be made about families having this ability regarding "hard-to-place" children. Thus some agencies have begun to utilize group meetings as an educational tool for potential parents, providing a good deal of information about the children, about how they fit into families, and about the nature of the adoption process leading up to the placement of such children. Not all agencies use the educative approach, however. Some view the initial contact phase as mostly an administrative matter and use group meetings as a more efficient form of communicating essential information regarding agency procedure.

Chapter 9

THE FAMILY STUDY PHASE

The family study phase is that period of time during which the family and agency formally consider the possibilities and ramifications of adoption. Traditionally the family study is what social workers consider the heart of the adoption process. Because it has been seen as a central feature of adoption the family study has received the greatest amount of attention in the literature. Both parents and agencies are acutely aware of what happens in the family study. The content and process of the direct exchange are the topics of the literature, of staff conferences and parent meetings. Yet despite the centrality of this phase, many families and workers were surprised when asked, What are the objectives of the family study? What do you hope to accomplish? Why do those objectives make sense? Responses revealed a considerable spectrum of opinion regarding the family study phase. This is not unexpected, because as a traditionally central focus this is an obvious area of contention.

THE FAMILYExperiences of Early HTPs

If there is any common thread in the experiences of early HTPs in regard to the family study phase it is that their workers were operating within the context of an 'evaluator' role concept. The response of early HTPs to this form of family study varied considerably. Some found it

satisfactory; others grudgingly acquiesced to it; a third group openly fought the assumptions and process. On the whole, however, early HTPs found little positive to say about the evaluative approach:

When they operate that way there isn't any respect for you as people who have something to offer.

Unhappiness with the evaluative approach centered around the defensive posture into which it forced families. Early HTPs tended their interest to be a resource in meeting a need they thought the adoption professionals felt was urgent. Thus their assumptions about participation in the system were jolted by the testing process. Typically families endured in some fashion this incongruent exchange. Once placement was effected they became organizationally active, with many of their energies directed toward changing the practices of the adoption professional in the family study phase.

Even those families who found their family study phase satisfactory tended to damn it with faint praise.

We seemed to get along well with the worker. There never seemed to be any question over whether or not we would get a child. It just seemed that this was the thing you had to do, you had to have these meetings and they had to talk with you, I guess. I don't recall it as being probing, but my feeling were strong that I'd better be on my best behavior, just not really divulge much of anything or they wouldn't give us a baby. It was similar to the fear that after we got it they would come and take it away.

Another family had similar memories of the family study phase.

We never questioned what was going on. It seemed a function of what the worker and agency wanted mostly. We did the interviews because they were required, it was the routine. I suppose if there was ever any question about getting a kid we'd have worried.

The same family, in response to a question about the family study and its use to them relative to subsequent issues they faced in adoption said

We never really talked much about what adoption would be like, or the problems of having a black kid, or any of that. It was mostly stuff they needed, like applying for a loan or something.

In the situation of other families the family study phase was recalled somewhat more cynically.

Mostly it all seemed routine. Since it never occurred to us that we wouldn't be accepted we just went along with it. It was necessary for them to be sure we're ok. Of course some of the questions were a bit silly. I didn't feel threatened; I just felt I could manipulate the situation to make it come out right and I did.

Another family reported that because their agency was so anxious to place a particular "hard-to-place" child the normal process was in effect waived.

When we said we'd take a "hard-to-place" child they right away pulled out the picture and began the whole study process. We had only the minimal interviews. What we saw, from the time we said we'd take other than a healthy white infant, was that since they were so glad to see us, we could call the shots. From then on it was our ballgame. So for example we insisted on seeing the child in the foster home. They had never done this before, but they allowed us to do it. Also since she was older at that time than we had anticipated adopting we insisted that the process go quickly because we didn't want her to get much older before she came to our family. At that time the process could be really lengthy, but for us it took only 6 weeks.

Thus in this case the agency's sense of being desperate lead the worker to abandon the prevailing role conception of evaluator, and allowed the family's concept as a resource, and worker as a guide dominate. Another family altered the nature of the exchange by direct means.

We went in for our first interview together. The worker started asking all these silly question, like why do we want to be parents. That was ridiculous and I decided I wouldn't let her ask them. So after a little while I said, Look, are you going to give us a kid? That took the conversation away. She looked up kind of surprised and said

Yes. So I said, ok, I'll answer your questions. And we went through the stock questions for her report and got the kid.

For several early HTPs the family study phase evoked considerable anger, either for what occurred or for what, in retrospect, they would have liked to occur.

My assumption at the time was that the study was to find out what kind of family we were, what kind of kid would fit, that they were trying to find the best possible home situation. They asked a lot about what we expected in kids, and poked about into our backgrounds and motivations. There seemed to be a lot of emphasis on middle-class values--enough money, do you do what is acceptable? that kind of thing: They didn't seem to care about the love and care a family could offer. You got the sense that the agency had a check list of things that had to be there, and that was what the study was about. As a result we didn't get enough background on placing older kids, how to proceed once she came. Right now we're trying to sort out some of the things that I felt made life more difficult for my child, and what we could have done. Families need help with that; we could have used a lot more support and preparation. It's not like having a baby. With an older kid you are integrating a whole personality and history into the family, and that's hard.

Another family was more direct in characterizing the process as "very irritating."

For one thing I suspect that the study is a waste of time. The idea that they're coming to screen out the undesirables. They tell you they're not looking for this and they're not, looking for that, but they don't tell you what they're looking for in a positive way. I don't think they know. It seemed like a very middle-class person coming and looking over our lives and judging our worth as parents. I thought we probably had very different value systems, but that that person was in control, that we didn't have any options. For example, though they said that the living circumstances didn't matter they wrote down descriptions of every room in the apartment, and what kind of furniture. I distinctly remember she had to count the windows in every room in the house. The reason to me for that is totally obscure. At that time the religion requirement was in effect. The child we had in mind was Catholic, though he had been given up at birth. We had no intention of bringing him up Catholic, but we decided to lie, because we knew they would ask us. It's

hard, because you have a feeling that you want to be forthright, and that your intentions are honorable, but you really don't know what to expect. So you're put in a position of saying something you don't mean in order to get what you want, and that is an unpleasant situation. So we talked it over and decided we would tell her we'd bring him up Catholic. What happened was we didn't realize for a "hard-to-place" child they were willing to make all kinds of exceptions. So what she said was, you needn't bring him up Catholic, but what religion will you? Well since we didn't go to church then in the same breath I said Episcopalian and my husband said Unitarian. And all I can remember is that it was very anxiety provoking, the whole situation of feeling that whether you get a child or not depends on every individual question.

For another family the mechanical nature of the family study was disillusioning.

We had known some people who were involved in ODS when it first started. We'd talked a lot with friends about adopting trans-racially. We realized that we didn't really know as much as we wanted to, so we were looking forward to the agency as being helpful. Because of the ODS friends we knew to call MARE first. They referred us to X agency by letter, and said in their letter to us if we didn't hear in a week we should call. We didn't hear, so we called and got an appointment. Our first worker was pregnant, and wanted to finish the study before she gave birth. The first interview covered a standard ground. We arrived for the second interview and no one was there. The worker had delivered, but no one had bothered to call us to cancel the appointment. They said they would contact us in a few weeks. When we hadn't heard in 3 weeks we called, and got another appointment. We went for that interview, and it was a duplication of our other first interview. The worker could have been a machine. It was as if she were programmed to get certain answers, and if something different came it meant something was wrong. So we learned we couldn't disagree, that it was necessary for us to present the ideal middle-class couple facade to her. So we told her everything she wanted to hear. If you're used to taking College Boards or tests like that you can get by the adoption study, because every answer is predictable. Of course it wasn't much help to us as parents; we already knew we could pass tests with high grades. They might as well have done the home study with a computer sheet.

The most serious problems in regard to the evaluative approach were experienced by those families who directly challenged the authority of the professionals in the exchange. Most of the families described scenes of considerable tension, or referred to other horror stories with which they were familiar:

Our first frustration came in making calls. My husband was in a job training program then, and the agencies just said we couldn't adopt until he was out because of the money. That would have meant 5 years, because he was learning a skilled trade. I don't even know if I talked with social workers or secretaries on the phone. But I just believed them. So we said, maybe foster care. With all these children around they can't place maybe we could have a child placed with us for foster care whom we could later adopt, if it would be a "hard-to-place" child. We started that, but got bounced around in the system. Mostly it was the social worker. She had just written down what she had wanted to write down, not what we said we were interested in. Finally we screamed and hollered. Then we got set up for the family study for adoption, and got a call for a foster child at the same time. We asked what to do, and the adoption worker said take the baby and if she's free for adoption we'll do the adoption with you. That sounded strange, and we didn't know how much was due to our screaming and hollering, but we said ok. We worked hard for the kid, who was 4 months. She was anemic, got pneumonia. When she came she was a blob, and by the end she was really responding to us. But the worker said if she looked white she'd be placed white, even though everyone felt she was mixed-race. We really wanted to adopt her. The placement worker felt she should stay with us, but our social worker said we were just projecting, that there was no such thing as a baby knowing who its mother or father was at a mere 5 or 6 months. There were a lot of battles, and the thing that kept us going was an ODS member, who was a foster parent and social worker too, who helped a lot in telling the sorts of things to ask or do. Anyhow then our adoption worker stopped our family study, but said it wouldn't affect our prospects any. But he also said if we went over his head we would never adopt in any agency, private or public. Of course then we believed him; we didn't know any better. (We do now!) Then they took the baby to the agency anthropologist, who decided the baby was white and would be placed in an Italian home (her mother was Italian.) The worker had said we would have 2 weeks to appeal, so we didn't call til the next day.

But by then the worker had called another set of parents, and told them they would have the baby the next day, and told us, how could we be the type of people who would deprive other people of having a child? And of course we couldn't.

The last thing the baby's social worker said when she went out the door was, You're mad at me because I'm taking the baby out but I'm only working under your adoption worker's orders. We had a meeting yesterday and the only reasons you're not getting the baby is because you didn't have your adoptive study done. Foster care study doesn't count, because foster care standards are not as high as for adoption. You do not have to be as good a person to be a foster parent as you do to be an adoptive parent. Isn't that a hell of a thing! So by then we had had it. We got hold of the supervisors in that agency, and jumped all over them, especially our worker's direct supervisor. They said to come in, go through the process, and guaranteed that we wouldn't have any more problems. So we went in and smiled at our adoption worker and answered his questions. We did that part in 3 weeks, and he said in 1 month we would get the letter of approval. In 1 month and 2 days I called because we didn't have the letter. The worker said he had done his part, he didn't have any idea how long it would take, and as far as he was concerned he was through with us and we would have to wait whether it was 2 weeks or 2 months or 2 years. So we right away called the supervisor, who said she had only gotten the report a couple days before, and the report said we would only take a baby 9 months or younger. I said that was wrong, we would take a baby older than that. The supervisor said you mean you'd take a baby 11 months old? I said yes. On the next morning a worker called and told us about our daughter. She wanted us to drive to the agency the next day to see the baby's picture, drive in again the day after and see the baby and then have the baby delivered the day after that. We told her that was out of the question. We just wanted the baby, period, sight unseen, because we'd had two biological babies and had never said, Let's take a look! We got the basic information by phone and that was enough. So the worker agreed. But she wouldn't bring the baby to our home, we had to meet her at a neutral spot. So now the kids all think that you get adoptive babies at X Shopping Center. The whole idea was that if you delivered the baby to the house and the parents said No they would be embarrassed by the worker taking the baby back out. Of course we had two neighbors who worked at the shopping center, so everybody was saying, See that couple over there They're waiting for an adoptive baby! Anyhow we got our baby, but it was a fight all the way. And we never did get any help or preparation.

For most early HTPs the family study had such contestive aspects. The exchange was incongruent in the evaluator resource category of interaction. Thus early HTPs found the family study contradictory to their notion of their role as a resource. Accommodations with the worker's evaluator role were made in the short run, to achieve the family's goal of having a child placed. But in the long-run the frustrations of enduring an incongruent exchange by denying themselves a role about which they felt personally confident led early HTPs to become organizationally active. Thus the client constituency broadened, and the sense of confidence in asserting the family as resource increased.

Experiences of Later HTPs

If the experiences of later HTPs are an accurate indication the impact of the early HTPs on the family study was at least partially successful. This was true in two respects. First later HTPs report considerably less emphasis on a rigidly evaluative approach. While the need to evaluate continued to be a part of what social workers said they were doing, the approach was less dogmatic. Information was more often willingly given as to purpose and objectives, and agencies and workers exhibited greater willingness to review and change practice and policy. Also there were instances reported in which the process was more explicitly educative in focus. One agency shifted its entire approach to an educative basis. For others it was often an unanticipated by-product of the use of group meetings in family study, or from a greater openness to investigating questions raised by potential adoptive families. A second area in which early HTPs impacted the family study was in preparing later

HTPs for the type of things which agencies might seek. Thus those families with some contact with ODS or other adoptive parents were more facile in dealing with the standard evaluative approach.

For many agencies the effort was to get the potential parents to do most of the evaluation of their readiness to parent. This took some skill on the part of the worker, but in cases where the worker had such skill later HTPs reported very useful experiences.

We had an excellent young woman worker. She was very sensitive to the people in our group, and when we finished the study phase she was a real go-getter in finding a kid for us. She used the group meetings to get us all to hear what we thought and felt. There was no obvious attempt to judge. The way she dealt with us was really therapeutic. She brought us out, so we would do the thinking. She had a gentle quality, non-presuasive, which made us very comfortable. So we got to a lot of the questions we had, we got our feelings out, and that helped a lot.

Another family whose adopted child had been with them for less than a year could still remember many of the issues covered in the group family study, and how that had helped in the first months.

In the family study we had anticipated the worse. But they mostly focused on the children, and the kinds of problems that could occur. The problems were fairly extreme, like, severe acting out. They were preparing us for the fact that this can happen. You know, a child 6 or 7, with a background of 4 or 5 foster homes or an institution; he can have some pretty fantastic problems. They informed us about what can happen, to help us make up our own minds. It was kind of a joke at the meeting that we never got an answer. If we had a question it was always, well what do you think? They always threw it back on the group. This precipitated discussion within the group. Through that they'd interject points and when we'd finish they'd summarize. When you finally came to it instead of getting the answer that might have taken 30 seconds we hashed it out for 30 minutes, came out with the same answer but knew why. We were prepared for the rough problems, but we also got the positive aspects of it all. So after the meetings we were prepared; well at least we were aware. We thought maybe they would try to

push the severe "hard-to-place" kids, but they didn't. The point was to know what you can handle, what you want. You have to understand your limitations. We were very insecure at first, because we hadn't been parents before. We didn't want to get into something we couldn't handle, but after the group we felt a lot more confident.

Some agencies retained the individual and couple interview method for the family study. In these situations the nature of the family study phase depended almost entirely on the approach that the worker utilized. In some cases the personality attributes of the worker overcame other negative factors in the family study, such as long waits between visits or a rigid set of criteria.

It took a long time to get through the family study, longer than it should have. Our social worker is very sensitive, very good. We decided that she is just a kind-hearted person who couldn't say no to anybody; she just isn't a good administrator of her time. We never could figure out what she was trying to accomplish. The first thing we thought was what kind of families we came from, was there any dread disease, social or physical. Then it seemed to be our attitudes on things like religion, bringing up children. What kind of people we were, and like that. She wanted to know about our relationship to each other, and to our parents. What bothered us was that this lady was going to tell us whether we could have a family. But she wasn't married hadn't ever had a husband, didn't know what the pressures of marriage would be. We were kind of resentful of some of the questions; well, that was really fear. We didn't know what our rights were. Sometimes we didn't know what to say, so we just said what we thought. At one meeting she introduced the idea of adopting a "hard-to-place" child. She suggested we read Jan de Hartog's book The Children and we did. Then we read everything in sight. We became the local experts. Pretty soon this idea became a real fabric in our lives. And then we were happy we had so much time between interviews, because this had time to sink in.

Another family found that the informal family study interviews with the worker were a time for "playing games" to satisfy the worker, but that

the questions at the sessions prompted long and useful discussions that they held on their own.

The theme of a lot of the questioning was that adoption is second best. It seemed our job was to go in there and convince the social worker (who was younger than us, not married and straight out of college) that adoption is a neat thing to do, that we didn't have to wait until we had our "real, own child" first. They spend time trying to find hang-ups, even though a lot of these things are superfluous. But after the sessions we would spend hours going over the sorts of things that they asked or might ask. A lot of it was useful, but they never knew.

Not every later HTP could report a positive experience in the family study phase. Two of the later HTP families interviewed had gone through studies at two different agencies. The first family was rejected by its first agency, but accepted by a second. The second family adopted at one agency following a successful family study, and had recently adopted at another agency, but only after an extremely unpleasant family study. The comparisons are instructive in demonstrating the variations in role concept in the exchange, and the problems of congruent or incongruent exchanges.

For the first family the exchange with the first agency was Evaluator/Resource, and with the second agency it was Educator/Resource.

I'm the sort of person who, if I haven't ever made a peanut butter and jelly sandwich I go to the library and read how. So we had read a lot about adoption and foster care and thought we knew a good deal about agency procedure. We made the initial call, to an agency and got a quick response. We set up appointments and all, and it was a rotten experience. We got a flukey worker. We went in saying very clearly where we were, that we were thinking about permanent foster care and perhaps adoption. We didn't see that as a problem, but to the worker it was an enormous problem. You couldn't do that. It had to be either lean meat or fat. It was bad enough to her that we already had biological children but now to talk

about two other kinds it just blew her mind. She couldn't understand how we could do both. But we thought the legal status didn't make any difference, but how the kid feels. We don't need to feel possessive of kids. But all that was very threatening to the worker, and we were threatening to her too. She never could hear what we were saying, and we could never understand why she didn't. Anyhow we had two interviews together. Then she scheduled interviews for each of us alone. She saw my husband for his interview alone. I was to go in on a Thursday; on Tuesday I got a phone call saying she wouldn't be available because of illness. I asked to reschedule, and they said when she came back in we could reschedule. On Wednesday we got a letter saying, we have decided we can't use your home at this time. So obviously when they cancelled Tuesday they knew that the letter was in the mail. And that made me angry because it wasn't honest. I called the agency to try to talk to the worker about what happened. No explanation at all. She was not available to me by phone, nor would she talk to my husband. At that point he called the supervisor and talked to her. She wouldn't tell him anything except that we should not consider that we were not good parents, but that they wouldn't consider us for foster care but perhaps for adoption. She wouldn't talk about why, or any of the reasoning behind any of it. The thing that blew my mind is they claim responsibility to the kids, but nobody feels responsible to the applicants. She said she didn't have to discuss it with us. My husband called me from work and told me this. So I called her and wrote down what she said, because I couldn't believe it, as someone who works with people. I told her, we were concerned. We were seeing this thing with the agency as a growing process, and we could understand that there might be areas that they felt we needed to grow in, but that it would help us if they could tell us. She said, I don't have any responsibility to help you grow. Now if you and your husband want to come for marital counseling (which is a terrible thing to say to anybody) we will work with you as clients. I knew we had a good marriage, so that wasn't threatening, I just wondered what it was that they thought they saw. So I pushed her a little and said, you've left us very confused. Don't you feel any responsibility to us. She said, No. Then she got nervous and said, Perhaps there was something in your references that made the worker concerned. (So we called all the people who wrote references. They sent us copies of their letters and all of them thought we would be terrific because we had been doing this sort of thing informally.) The next thing she said was, Perhaps it would be helpful if you clarified your life goals for us to work with you. Then she said, it's been nice talking to you. Good bye.

Now none of that was really very helpful. I guess what you do in that situation is that you either fight or give up. We thought if we go to a second agency and they say the same thing maybe this isn't really for us. On the other hand we had done a lot of thinking about this and really had a commitment to ourselves. I wasn't about to give up. So a close friend had a close friend in ODS, and she recommended we talk with her. So we did. We reviewed what we had said and what had happened. The ODS person said the only thing you are saying that could conceivably put an agency off is, we want to do this because we think there are kids out there who need us. Sometimes workers interpret that as "do-goodism" and it bothers them. Other than that nothing you say should blow a worker's mind. So I said, ok, another agency we low-pedal our interest, in doing this to help kids, even though I don't think that's a bad motive. The other thing that happened was that the ODS person showed me the MARE book, and all of a sudden the reality hit, and I was saying I could mother that kid and that kid and that kid. And we knew for sure there were kids available, and we swung toward adoption.

So we went to another agency, in fact two. We attended group meetings at each. The first one there was so much tension you could spread it like butter, while the second was really handled well. The worker was compassionate, and there a lot of give and take with the couples. We thought we'd go with the second agency, but got a call quickly from a worker at the first who said she thought we could be parents for some of the children they had available, and we were getting priority. We panicked, because of the fee problems. But the ODS person said the key thing is to get out of the bag about being anything but what you are--the more you tell them about who you are the safer for everybody, because if it's not a good plan it's better to find out early. But the worker said, we're not going to eliminate anybody about money, because we've got kids who need homes. So we brought in a copy of our budget, and we all decided what is fair. She was warm, easy to talk to, non-judgmental, supportive. We were going into the thing that they had kids and were looking for families, and we were a family looking for a kid. What we were going to do was sit down together, get to know each other, and we'd learn from each other in the process. Mostly it was an exchange, and she would ask us some questions so that we could learn about ourselves. That's exactly how it went; it was terrific. We proceeded on the basis that if at the end of the study we still wanted to, they would place a kid. Their thing was just to know where we were, what we wanted to do, and that if there was a selecting, we would be selecting ourselves

out. We never once felt we were withholding information, or that we were selective about information. And that's really groovy.

The circumstance for the other later HTP family was almost the exact reverse. The first adoption on the Evaluator/Patient exchange, but appropriately so, was relatively quick, the worker was helpful, the use of a written autobiography prior to the first interview helped the family clarify their thinking about themselves and their preparation to be parents. As a result, the general feeling the family had about agencies was very positive. Thus by the second adoption the family felt themselves to be a resource. The agency, however, saw the interaction as Evaluator/Patient.

When we decided to adopt our second child we went to a group meeting at the agency. They said that the waiting period for a white infant was very long. Based on what they said at the meeting we decided that we would consider an overseas child. Because the first adoption had gone so well we didn't go into the interview with any fear. But the worker put us ill-at-ease from the beginning, because my husband had said he could consider an Oriental child, but felt he couldn't consider a black child, yet anyway. So she hacked away at him about the prejudice issue. There were numerous meetings, lasting two hours or more. She kept hacking away to the point that I asked him what his problems might be with an Oriental child, just because this woman was so tenacious. And I said Oh my heavens, even I'm starting to believe it's a problem. It was a very unnerving experience. She wouldn't accept anything we said; she just wouldn't believe us. She had this annoying technique of starting a sentence, then leaving it dangle, and you felt that you had to finish it. Finally we developed a counter-technique. We'd just wait! It's as if she had to keep looking until she would find something wrong; that she wouldn't be happy until she did. What turned out to help was that she wanted us to talk to an ODS family. That was a help because ODS had a lot of information. And one family was a real help. We told them how things were going. They said you have to play the game with the social worker. So we told the worker that we had talked with the ODS family, had discussed all the issues of Oriental adoption, and said that our minds were completely clear. And this seemed to do

the trick. Then she visited us at home to see how we handled our son, and that went real well. She left here as if she finally believed us. But I still don't think that woman knows us yet!

For later HTPs the family study was a more open useful process, though this occurred as often by chance as by decision. The fact that agencies are increasingly more aware of the resources which families bring to the family study phase is attributable in large part to the organizational pressure put on them by early HTPs, and their organizations. As the number of HTPs expanded their confidence in the appropriateness of their role definition increased. With the pressure brought organizationally for the adoption exchange to be more congruent with the clients' changing role definition, workers have had to re-examine their role definition. Evidence presented by later HTPs suggests that though a shift by workers to a role definition of educator is not complete, there is greater frequency of congruent interactions of the Educator/Resource category. This role change has meant instability for bureaucrats, as confidence in previous definitions is undermined. Thus resistance to such change has been strong in some instances.

THE AGENCY

For the social worker profession the family study phase is the adoption process; everything else is subordinate to it. The changes that have occurred and the debates which continue about the family study phase are pronounced. In many respects it is fair to characterize the

literature on adoption practice as a literature on the family study phase or on other phases as related to the family study phase. In terms of the agencies considered in this study, nearly every variation in practice was present. The primary debate over approach, that of evaluative vs. educative responsibilities, is the context for discussion within these agencies. In very few agencies was it possible to identify time and sources for change in practice during the family study phase. Only a few agencies had consciously considered and implemented changes. In most cases changes evolved, and were confirmed by policy action of the agency director or board which tended more to summarize than initiate a change.

Most agencies were ready to acknowledge the differences in their perspectives from previous practice, especially in terms of the broad details of the family study.

Adoption of ten years ago was very involved with matching children--normal healthy white infants--with families--normal healthy white families. Color was important; educational background was important; aspirations were important; social class was important. To my way of thinking there was this whole rigid way of looking at families and children. We were very involved in how prospective parents saw their roles, though it now seems very stereotyped.

Many agencies attributed the ease with which the stereotypes were applied to working almost exclusively with healthy white infants.

It's hard to face crucial issues in infant adoptions. They aren't there, or they're not immediate. In a way we could do whatever we liked, because things turned out ok no matter what.

Infant placement all but assured a positive outcome. Therefore they served to confirm the validity of the prevailing role conception. In

the evaluative approach a worker finds out about a family's background and life experiences. Presumably this enables the worker to predict what would occur and thus prevent problems by not placing. That this predictive ability was established not by systematic comparative research but by the accumulation of inherently positive outcomes did not diminish its evidential power. Workers were confident regarding their role conception, and content with conditions for a stable exchange.

We never had to question whether anything we did made any sense or not because our evaluations always seemed right. I mean if you figured this is a perfect placement and then nothing happened you kind of said to yourself, see I was right. And people we turned down who complained were just sour grapes. I mean if we could tell what worked, then obviously we could tell what wouldn't too. That's why we had the authority, because we were supposed to know what was best. That's why we went to graduate school, to learn how to do that. We were being responsible, acting professionally, and it would have been irresponsible for parents to make those decisions. How would they know better when our experience had shown us we were right?

Confirming of the validity of this role was closely tied to placement of healthy white infants, however. The style and premises of the family study phase change when families began to express interest in heretofore "hard-to-place" children. Initially there were few such instances. At first an attempt was made to fit such applicants into the prevailing approaches.

The response of the agency to these clients was a mixture of surprise and suspicion, but we went ahead and gave these people a traditional home study. The usual issues of fertility, marital relationship, background information, biological parents, were covered and the traditional criteria for approval or refusal was followed.

There was a feeling that the backgrounds of these couples was "less than ideal;" nevertheless such adoptions seemed to be working. But beginning with the 'watershed years' in the mid to late 60s agencies began to find that families who came expressing interest in "hard-to-place" children were different.

The couples who came in response to the publicity were different in some obvious and less obvious ways than the couples we had seen previously. The clear differences were they were younger, many had children and could have more, and they seemed more comfortable and confident in their contacts with the agency. Other differences were less clear. The least distinct of these centered around motivation. We were used to dealing with couples who came to adopt because they could not produce a child. But these couples seemed to come not primarily because of what they lacked but rather because of what they had to give in response to the needs of the children.

The differences in the families notably their role conception as resource, provided an evident challenge to the approach of the workers and the format for the family study and conclusions based on it.

We knew how to handle with clients their frustrations around child bearing; we did not know what to do with people who were saying, I have no needs, but I have a lot to give. We had no developed idea of what would constitute healthy motivation to adopt "hard-to-place" children. Thus in a real way we had no choice but to accept their own statements of why they came in to adopt. Because of our own feelings of responsibility for these children we had the need to sanction what was said to us.

The sense of having to change the nature and premises of the family study because the role conception of families interested in adopting was changing was true for each of the agencies. What was different was the sort of change which occurred. The extent to which the exchange was resolved toward the more congruent Educator/Resource category depended on a variety of factors contributing to worker or

client sense of confidence about own role. Particular factors contributing to bureaucrat sense of confidence include the size of an agency's professional staff and the theoretical orientation of the agency director. Factors which would tend to confirm the client confidence in role include the demand directed to a particular agency and the degree of activity of the agency's board (as opposed to professional staff) in determination of agency policy.

Agencies with relatively large professional staffs were more likely to deal with the pressures of incongruent exchanges created by this new group of potential adoptive parents and new pool of adoptable children (heretofore thought unadoptable) by reasserting the dominance of the professional in the exchange. This was typically done by reasserting the worker's evaluative role, with traditional success the basis for high confidence. This was true because the likelihood of informal reaffirmation of the importance of the professional contribution was significantly increased by proximity of professionals to other professionals. Bureaucrat confidence was reestablished by resorting to safety in numbers. By comparison any family (or even a group of families involved in a common group family study process) had a relatively less powerful position. The probability of meta-exchange instability being resolved on premises more favorable to the bureaucrat point-of-view is increased in an agency of 20 or 30 workers, through the daily chance meetins (over coffee, in the hall, etc.) and the formal staff meetings. The frequency and consistency of input of the professional perspective is likely to outweigh competing claims made

by clients. Confidence in bureaucrat conception of role is confirmed by regular repetition by and among the professional peer group. Thus in an agency with a large professional staff which switched to a group family study format because it permitted families to provide each other with a context and the content for a decision about adopting (the educative approach), workers began to feel extraneous to the process. They responded by reasserting as their role the right to decide who should be placed with whom.

We went back to matching, but instead of hair color and eyes as factors the emotional-behavioral components of the child-couple constellation were analyzed in an attempt to create a placement that met the needs of both child and couple. The role of the social worker in the group changed, so that the role was to challenge rather than support, to question rather than to accept. Though we still were a resource for the helping a couple decide if a hard-to-place child is for them, we also had to be comfortable that the couple's decision is realistic.

Interestingly the agency reported that the number of couples who withdrew or were refused increased sharply.

We found ourselves saying that they were good families but we could not provide them with the child that could give them what they needed for parenting.

This shift, which had occurred "without the benefit of research but based on the experiences and impressions of the staff," had the effect of re-instituting the evaluative approach (albeit in the guise of an educative format). High Bureaucrat confidence was restored, with a diminishing client confidence because of increased refusals. Meta-exchange stability for the bureaucrat was re-established.

The theoretical orientation of the agency director was very often the determining factor in the extent to which the agency resolved

congruency toward Evaluator/Patient or Educator/Resource. Given the public service bureaucracy characteristics and professional orientation potential of any adoption agency, the probability of resolving exchange incongruencies toward the traditional bureaucratic role definition is great. As Billingsley pointed out in his study of bureaucratic and professional orientation patterns, orientation to either professional standards or agency policies in social service settings is for all intents and purposes interchangeable. It is a small number of people, whom he classifies as 'innovators,' who create practices which tend to be more beneficial to the clients.¹ If such innovators are in positions of authority in an agency (such as director) they provide a role conception more compelling than that traditionally offered by the professional organization.

When I was hired for the job as adoption unit director the agency said, Do something new and creative. I think they meant create a computer study or something. But what I did was begin looking at what our real role should be. It seemed as though the agency had been acting as a 'mighty fortress,' dispensing wisdom. I thought we should be bringing all kinds of families and kids together, be a leaven in the world. We had been avoiding taking risks. Children are not problems but opportunities. Every child who never gets placed is a bigger failure for us than a child who is placed but the child and family learn they don't fit together. You know the child, the family and we all learn something in that situation, something none of us would have known if we hadn't tried. And usually that makes the next time better. So we thought adoption was a good thing itself, not second-best or special for only some people. But by selecting "nice" people as adoptive families meant that you had to be "special" or "good" to adopt, and that average people couldn't. That wasn't saying much about our belief in people. And by making exceptions for "unusual" kids we were saying they weren't as good either. And then we said, how can you really know anyone well enough to be predictive. What qualities are good? Even if the world stood still you couldn't know. So we decided the best

thing we could do was provide a way for families to get the best possible information and that they would make the best decisions for themselves.

In another agency, this one with a relatively small staff, the workers attributed the change to the flexibility of the director.

There have been more changes in worker ideas than in couples. We always expected couples to want only normal children, and so we made a lot of children into "hard-to-place" who weren't. In our agency a lot of the workers are young, and we were encouraged to try new things by our agency director. He isn't hung up on rules; he'll change if there is a good reason. And when we saw that the placement of older kids didn't blow up, we learned a lot about how we operated. We changed and he backed us up. When we could say that people told us that we were helpful, and looked forward to our visits after placement, and didn't hesitate calling when they thought we could help, then the director could say, Good that's the way we should operate.

In other agencies, if the director is more strongly oriented to traditional approaches, this will confirm the position offered by the professional organization. In adoption this will push the agency to a more traditional evaluative approach. In such agencies the adoption process, and especially the family study phase, were described in language which tended to emphasize what a family 'had' to do what was 'vital' in the process, how the worker 'assessed' the family.

We often have families come in for screening interviews, even before the family study begins so that we are sure that the couple knows what they are talking about. We refer them to ODS, because it is vital for them to have a beginning feeling so that they are not just talking theory but the reality of what the situation is. These meetings are not held quickly, but over time, because families have to have time to think about all of these things. We try to get to motivations, because so many people seem to come in for really bothersome reasons, such as "We want a child that nobody else wants."² Once we're into the heart of the family study we want to know life experiences and how they solved problems. What they're like, how they will handle the changes in their life which adoption will bring, what the differences are and how they will handle problems.

For still other agencies changes in the family study resulted from external demands on the agency. They were not aided or resisted by professional sources, or agency directors.

There was a period of time when we were really concentrating on "hard-to-place" children. That was when there was a weekly series in the newspaper highlighting the children available. We were holding more group meetings then, both for information and occasionally as part of the study. But after a while a worker or two left, and the series stopped and we reverted to the individual interviews. People just weren't calling as much. But one thing that stayed was that we learned it was really useful to be blunt with families about the issues in adoption, to really make concrete the kinds of things which can occur. This reality thing really helps them, and lets us be more useful to them.

Another agency talked particularly about its changed views of families resulting from the perceptions of early HTPs.

Those original families were helpful to us in that they told us that they saw themselves as the primary people committed to the child, and the agency as a facilitator. Traditionally we had thought of the agency as having the primary responsibility. When we saw that we weren't it was a real shift in our thinking. Now we can really be honest when we say we're in this together, but you'll decide if you're really interested. We don't have any check-offs. It's come from an adoption procedure to an adoption process. Families aren't studied; we provide a context for them to get and assess information, about kids, about themselves and so forth. Then they tell us when they're ready, and if they're ready. It's a lot better to assume that families are healthy, that it's not somehow pathological to be interested in adopting or fostering. One thing we learned was how to listen, what to listen for. When you don't have to play God, you really can be more helpful to both kids and parents, and for a longer period of time. And this also respects the real skills of all our staff much better.

Finally with some agencies the change toward congruency Educator/Evaluator was prompted by involvement of the agency's board in policy making.

In our early years we did "hard-to-place" adoptions only on request, and they were very few. But our supply of healthy white infants was decreasing. What we did first was cut down on requests for second placements of healthy white infants, and then stopped doing studies for about 1 1/2 years. But what happened was that we had some children that we couldn't find homes for, and we found that there were children out there that weren't being placed. Some of our board members were very aware of the total picture of need in adoptions, and so everything worked together so that we added staff to work in this area.

In another agency a similar external structure was the key factor.

We knew some people in ODS, and started involving them in our pre-adoption group meeting. We would do our routine, then the ODS person would talk about the kids and invite people to ODS meetings to learn about what it's like to be an adoptive parent for these kids. Then we got thinking about what we could do to help get a lot more of these kids available for adoption. A lot of these things we learned about through participation in the MARE Technical Advisory Board. It was really the MARE director's influence that got us thinking about this, and talking with ODS people seriously.

Incongruent exchanges (Evaluator/Resource or Educator/Patient) create a lower sense of confidence on the part of bureaucrats in the meta-exchange. They attempt therefore to regain a high sense of confidence. In the adoption agencies studied the attempt to regain a high bureaucrat sense of confidence was made by moving to a more congruent exchange category. If the agency had a large professional staff, or a director oriented toward traditional theories of action, the congruency would be achieved through reasserting the Evaluator role. Bureaucrats would achieve a higher sense of confidence through the reaffirmation of the evaluator role by frequent informal and formal repetition of its validity by the professional peer organization and/or agency director. Client confidence would be lowered (relative to

bureaucrats) increasing the proportion of placement refusals, or making acceptance of agency procedure a requisite for continuation with the agency beyond the initial orientation meeting. In either situation clients were forced to meet bureaucrat definition of role, namely that of Patient. The outcome would therefore be congruent, and bureaucratic stability increased.

Congruency through acceptance of the Educator role was more likely to occur if the agency director fit the 'innovator' category, and offered as valid a role concept (Educator) differing from the traditional. Alternately an agency would accept this role based on the effect of such external forces as demand, or active board involvement in policy making. Again the outcome would be congruent, and a new bureaucratic stability created.

Chapter 10

THE WAITING PHASE

The waiting phase takes place between completion of the family study and initiation of the placement phase. As such it is often ill-defined and over-looked, a slack period essentially unrelated to the service activities of the agency. Typically patience is counselled. Because of its non-functional nature the waiting phase has received little attention. There have been few changes in the way this phase is handled.

THE FAMILYExperiences of Early HTPs

Early HTPs seemed to have two types of experiences. For one group (roughly half of those interviewed) the agency had a child in mind for the couple throughout the family study and was able to make immediate placement with almost no waiting period at all. For the remaining families the waiting phase was a time of indefinite duration and uncertain activity.

We really didn't have any apprehension until the interviews were over. Then we didn't know how long we'd have to wait, and nobody told us. For some reason we didn't expect anything for several months, and were surprised when we got a call in a month or two.

For many of the families in retrospect the amount of anxiety they felt seemed foolish, because the 4 or 6 or 8 weeks was not really that long. Memories of the period tended to emphasize the family's sense of helplessness while waiting.

Everytime we called the agency they patiently answered our questions. They didn't seem to think it was much of a wait (4 months), and really weren't sympathetic to our position. What most annoyed us was that the delay wasn't because the kids weren't there, but just their paperwork and inefficiency. We couldn't do anything about it, even though there seemed no reason we couldn't get a child quicker.

For some families the inefficiency of the agency in completing the necessary approvals was made more frustrating by the knowledge that a particular child was ready for them.

Somewhere near the end of our family study the worker told us that a child had been born who probably would be just what we wanted. We got the basic information and said fine. But the worker had to finish her report on us and get it approved by her supervisor. In the meantime we were anxious to get the baby, because our biological child wasn't that old and we knew how much difference a day or a week meant to an infant. So we started getting impatient and calling frequently. The worker said she had to talk with her supervisor, but that the supervisor only came in on Mondays or something. And every Monday it snowed so the agency wouldn't open. So finally we suggested that she talk to the supervisor on the phone, since all these acts of God were intervening. But she wouldn't. Anyhow it finally didn't snow one Monday and she talked with her supervisor and it went smoothly. (I think she had a week's vacation in the middle there that she didn't tell us about.) The whole thing was totally frustrating, because we knew our son was there, he was becoming more real to us everyday, yet there was nothing we could do about it. It was like the agency really didn't care about the best interests of the child, which were to get him into his permanent family as fast as possible. Then we finally got the call that it was all set. So we said fine, we'll come the following day and pick him up. We've been ready for a month. She said, oh no, the lady who picks up from foster homes is busy. So we offered to pick him up. That was totally out of the question. Then we said, ok let's do it Monday. She said well he has a clinic appointment next Thursday. At that point I'd had it and said, Listen, we have a pediatrician to whom we're going to take him immediately anyhow. It's our kid and we want him now. And then she accused me of being inflexible, that we should be willing to wait. And I said if we waited til they were ready the kid would be in school before we got him. So we got him Monday.

In every case involving waiting, early HTPs indicated that it wasn't the waiting that bothered them as much as the ignorance they felt about what was happening. In the few situations in which a time period was given (the most notable were in the cases of intercountry adoption) the families were able to deal with the wait. In these instances workers were more likely to accept phone calls and to give up-dates on the status of the family's application. The frustration early HTPs experienced seems to relate to their sense of being resources, and thus expecting some information on their status. Workers, however, viewed them as patients, whose problems would be solved according to a professional timetable. In the case of intercountry adoptions there was greater congruency about the family's role after the family study, with workers now agreeing that the family was a resource for such children, and family's accepting the delays occasioned by the greater complexity of immigration.

Experiences of Later HTPs

The primary difference between the way in which early and later HTPs were dealt with during this phase is that later HTPs were more likely to be given a rough idea what the wait involved and encouraged to call in periodically. In most cases where later HTPs were given an approximate time period for the waiting phase it was over-estimated, so that they were surprised that it was "so short."

Again for those families involved in intercountry adoption the waiting time was rather specific, and readily endurable. This was especially true for those families who adopted through the Holt program.

The Holt people were very good. They told you exactly where you stood, and how long it would take. And you heard from them regularly. That was especially true once your child was identified. Then you'd get regular information on the child, physical and medical stuff, a picture, and reports on the child's development while both you and the child were waiting.

Some families noted that their agency was helpful on clarifying rumors.

When you're waiting you listen to anything. I'd call the agency, and the worker was very helpful about the current status for us and adoptions in general. I thought probably other families might be feeling the same, so I suggested a meeting. The agency held one and it was a big help.

But even in situations of greater access to the agency and worker, the families still experienced anxiety.

We got a phone call that said we were approved. And in the same phone call she said, "You may expect a placement anytime now." Those were her exact words. So I said, what does that mean. She said I don't know, but it could be anytime now. This was the only unfortunate part of the whole process, because from that time on everytime the phone rang I hit the ceiling. The one thing we didn't need was an uncertain time frame. We stole a week away for a vacation, and I was knitting booties for the kid, the whole time, none of which fit because he was so big. There was terrific energy expended in trying to relax. But the 'anxiety of when' got to me, so I started to call once a week to cope with it. She was good about that. We finally heard about 8 weeks after approval. That's very short when you look at it, but in terms of then it was an excruciatingly long time, especially when you've been told, anytime now.

Those families more directly involved in finding their adopted children experienced the least amount of anxiety.

For some time we had been interested in adopting a child from Asia. We initially got interested in a child from Bangladesh. I was in Canada for a conference last year, and talked with some people in an organization there who help bring in kids. We got some basic information, then contacted a lawyer here. He got us started, and got us to an agency which would do the required home study. Then I went to India and Bangladesh in the fall in relation to some other things. I had heard of some people who had just adopted over there and brought a

kid back. I visited some orphanages and left our name. When I got back we kept in contact with the people in Canada. Our agency worker was always very nervous about going through other than established international adoption channels. By then we heard that a family was going to Vietnam to facilitate the adoption of several kids. We had a whirlwind time of getting all our documents together. That was before Friends of Children in Vietnam was licensed, so every adoption was practically a new experience. Now it's considerably simpler. But all of the information got together. We shepherded our dossier through all the way. After about 3 weeks we received a picture of our child. Everything was completed over there in about a month and our child arrived about a total of 2 months after that family had gone to Vietnam. The only worry we had was in getting the work done ourselves.

For later HTPs the agencies seem to have extended the role concept of family as patient to include the anxiety of the waiting phase. Thus the over-estimation of the probable time period, and the comfort offered by phone contact both confirmed as accurate this conception of the appropriate exchange pattern. Though this mollified families somewhat only those families most directly involved in the activities of the waiting phase felt the exchange to be congruent with their role concept as resource.

THE AGENCY

For most agencies the waiting phase was a time in which the workers carried on the technical function of actually tracking down a child for a family. There were few comments on how this phase might be made more efficient, though some agencies did note that in going through an adoption exchange the time necessarily was extended. Agencies did indicate that they were tending to be more explicit about how long,

though inevitably over-estimating as a means of reducing the anxiety of the families and the pressure on themselves. Some agencies said they encouraged families to call in, if the family felt that would help. One agency indicated that whether or not a family called in served as an informal indicator of how interested the family really was. No agency indicated any potential role for the family in the waiting process. Indeed some agencies expressed distinct displeasure at the emergence of parent organizations getting into the business of finding children. Thus the traditional role concept as evaluator and technician was maintained by professions for this phase.

Chapter 11

THE PLACEMENT PHASE

The placement phase is the time from an initial offer of a child through the first few days of actual placement in the home. As such it includes all elements of preparation for the placement of a specific child as well as the initial adjustment of child and family. There is no easy demarcation between the placement phase and trial period; they blend together. However, there is a period of more intensified activity at the conclusion of the placement focused around the actual day of placement. Typically this intense activity continues for a few days after placement. It is the intensity which is different from the longer and generally more low-keyed trial period phase.

For families the placement phase is one of great emotional excitement. The normal routines of the family's life are interrupted. The pace of activity accelerates. Preparations are made for the new child. Living spaces are re-arranged. Schooling arrangements are worked out (if the child is older). Shopping expeditions are made. Time is taken off from work.

For agencies, however, the placement phase is somewhat more routine. No one would expect an agency to experience the same degree of emotional involvement as a family. For families a placement is a very special and unusual thing; for agencies it is part of the job. Indeed the lower-key, more ordinary approach which an agency is able to take may often be helpful. A dispassionate view in considering the

various issues related to a specific placement may usefully balance the enthusiasm of a family.

This useful balancing of energies is not what is typically reported, however. Both early and later HTPs report that during the placement phase they received minimal preparation for the issues which might arise relative to the specific child, very limited information on the child and pertinent features of the child's background, few clues on what to expect on the initial transition of the child into the family or how to facilitate it, and relatively little support from the agency during the placement phase. There were notable exceptions, almost exclusively concentrated among those families adopting quite recently. There were fewer improvements reported by later HTPs than might be expected after the number of "hard-to-place" children placed over the past several years.

THE FAMILY

Experiences of Early HTPs

Early HTPs consistently reported that they had received little information, limited preparation and no real help from the agency and/or worker in regard to issues and decisions that had to be faced during the placement phase. For some, the lack of information about the child was a confirmation that much of what they had been required to do in the family study was pointless. After all the information gathered about the family, the relative lack of information provided about the child was surprising. For many families this was a point

when they began to wonder about the entire process. Confidence in own original role conception increased as did suspicions about the validity of the bureaucrats' role.

Some families were simply surprised at how little information was initially given, a surprise probably increased by the assumption of an evaluator role that the social workers should do some sort of "matching" on evaluated characteristics, and therefore, that information would be forthcoming on parallel attributes or probable evidence of a particularly good "fit."

We finally got a call from the worker. She said she had a child for us. Of course by then we were ready to take about anything. Then she said he is this and that and has had this and his biological mother was this and that, and how does he sound? What he sounded like was one of those dolls they sell on TV--he walks and talks and wets real wet. I almost said that to her, but instead we said he sounds fine, is there anything else? She said there were a few other thing, but why didn't we talk about them when we came to see him the next day? I said ok. I hung up and after a while the realization hit me and I began to rush like crazy, called my husband and all. When we got to the agency the next day the worker told us a few more things, but I don't remember them because I was really excited about seeing our son. He was great and we brought him home. But I still don't know why this baby rather than any other was for us. I mean of what she told us he would have fit 99 out of 100 families.

Many families found that getting the information at the time of placement was inopportune, especially if the information was only provided orally.

One thing that was particularly inopportune was the day we saw our daughter for the first time. The caseworker who handled the mother was there. We'd never seen her before. She said now before you see the baby you've got to know all this information. Of course we could hear the baby in the other room. She said the mother is wonderful and the father is wonderful and they were going to get married and they

were in love. Then she gave us some heritage, like there were mothers and fathers in both homes. I think she said that they worked, that they were decent sorts. She gave some genetic background. But the point is that the whole thing was inopportune. By this time, after a number of months of building up to it, and hearing the baby in the other room it was idiotic to be logical and reasonable and giving us all this information. We finally said, Look can we just see the baby. And she was nice about that, she said ok. But I really don't remember much, and we never got the information any other time.

Other families were disturbed that the information they were given sometimes turned out to be wrong.

We really hadn't gotten much information about the kid. They did say that she was probably low/average in intelligence, whatever that meant. It turns out she's really very intelligent, it's just that the foster home gave her no stimulation.

Another family had a similar experience.

The agency said she had asthma, which I guess had something to do with why she was "hard-to-place." We took her to our pediatrician. She didn't have asthma, she had a bronchial weeze because she was overweight. She was a very fat baby; the foster mother equated food with love. But what they didn't pick up was that she was almost totally blind. We got her glasses. They had said she was borderline intelligence. Actually she just couldn't see! She's really very smart. Of course the baby is going to seem dumb on the dexterity test that psychologists use if she can't see what she's supposed to do.

The striking absence of any standardized approach to the manner of transmittal of information is apparent. Families tell very different stories about what information they have received and how they received it. Some got elaborate descriptions of the child's medical situation; others got a full background on the biological mother and/or father; still others got information on the child's foster care and development to date. No family got all of these, and some families encountered

resistance from agencies when they requested various types of information. Almost invariably families received information orally. Most families know that they were told more about the child than they remember. On subsequent request families often found the agency unwilling to put into writing even the information which they had earlier given the families orally.

For many of the families the utility of information became more important in retrospect.

There were lots of things which it would have helped to know. Like our second child was allergic to milk. Apparently a lot of black kids are. I don't know what they did with him in the foster home, but when we first had him on cow's milk he had diarrhea all the time. Our pediatrician switched him to soy bean milk, and he finally outgrew it. But you'd think that sort of thing they'd know and could tell you about.

For a family which adopted an older child the lack of information was a major problem.

It's not liking getting a baby. You're getting a whole personality, a history, and it helps to know that history. We got almost no information on her social history, and had no knowledge of her background. We made a lot of mistakes that when we learned things we had to undo. Of course I don't guess it is easy for workers to get this, but if they want to do things in the best interest of the child they really ought to work hard to get as much as possible and get it to the adoptive parents. This is not just a move from one house to another, but a change in culture. But we never knew what was "important" in her past, the life style, the daily patterns, the ways of coping. How did people deal with her? What were the signals and life expectations? There's a whole lot to know, and if you know it you can do a lot better by the kid and the whole family.

For many families the information issue related closely to the preparation for the transition of the child into the family.

Nobody ever talked with us about what adoption was like or about how we felt about children, like are kids an extension of yourself or can they be individuals. All they wanted to know was that we were nice people. So we had a romanticized view of what it would be like. Funny, on the one hand I'd think I'll love him but it will be different from a biological kid, and on the other I'd say he'll fit right in, no problems. So when placement time came we hadn't really thought too much about how it would go. We had a hard time then. He had been in a good foster home (in another state). He got no preparation from the agency there. Maybe they thought a 13 month old boy doesn't understand, but he did. When they called we were surprised because we had wanted a baby, but they do a number on you and of course we said yes. But that also meant we hadn't thought about the way a 13 month old operates. Anyhow he came and for a couple weeks it was really difficult. He went through a grief period. We thought it was us, because no one told us that kids often do that. He was confused, and couldn't sleep. Finally it settled down when he realized we were his and he was ours. It would have helped for him to know about coming, and us to know about what to expect and things about his past.

Another family reported a similar experience with an infant.

We got poor quality information. It took the agency a long time, I think a year, to get the medical records to our doctor, even when the doctor asked. We didn't get much of anything about his habits from the foster home, except a small scrap of paper on when he ate that read like what a doctor tells you to do. But he just didn't fit into the tempo of our family. He screamed when we changed his diaper; he had trouble keeping his bottle down. Nothing we did seemed to be able to comfort him. So we asked the worker if we could talk with the foster mother to get some idea what had worked, and what we might do to ease his transition. Sometimes his eyes just bugged out, he seemed so scared. But the worker wouldn't let us. We asked if that was agency policy. She said she'd check. We were stupid enough to accept what she said. So she said she would ask the foster mother things for us. We suggested what she might ask. But all she reported back to us was that the baby was no problem to the foster home. Well that really made us feel great, cause then we were sure we were doing all this to the kid. I think if we had known this might happen, or if we had known in more detail his routine, the nice things he responded to, and so forth, either of those would have helped a lot.

Thus families were not getting the information they felt they needed about the child. Nor were they receiving the preparation they wanted for the transitional phase of early placement. In many respects the difficulties of this phase for early HTPs are traceable to the differing role conceptions. Families saw themselves as resources, and therefore expected information and assistance useful to properly carrying out this role. Workers didn't see themselves in this educator role. Therefore they had no developed theories of action which required them to obtain and transmit certain kinds of specific information on the child, or general information about the transition of an adopted child into a family. Rather their role conception as evaluator meant that they had satisfied many of the role requirements by confirming the adequacy of the family as a placement. This assessment meant that the family could cope with the child based on the family's existing qualities. Further assistance was superfluous. Thus the family's demand for more information or related assistance from the worker served only to question the worker's role concept, something resisted by the worker.

Experiences of Later HTPs

For a majority of later HTPs the stories of the placement phase were remarkably like those of the early HTPs. Limited information, inadequate preparation, varying responsiveness to further information on the part of the agency. Though in general the agencies did not seem to be changing much, later HTPs were better prepared for the placement phase because of their contact with ODS and/or other adoptive parents.

Those families who reported good preparation for placement, adequate information and useful backup tended to be working with agencies which emphasized the educative approach. In these instances the families were less able to distinguish clearly the phases, but saw the whole thing as an ongoing process of joint learning and sharing of information. Thus for one family the placement phase simply meant a shift from general considerations to particular.

Since we were interested in older kids we had known about things like a courting phase, and shared parenting with the biological parents, if it meant fostering on a permanent basis rather than adoption. But when we started talking about X&Y in particular things began to have a real meaning. So things like the kids not being affectionate or appreciative were no surprise. We had a distance on our own needs. Because we understood ourselves better we could relate most honestly to the kids. The contact and communication with the agency was very important. The staff could be helping the kids through the phasing in. We could see the changes and they could and we shared the information back and forth.

For another family the worker played the vital role in making the placement phase successful for both the family and the child.

Our agency does the family study in groups, and that really made a difference. A lot of things about the adoption itself had been discussed there, so in general there were few surprises. But what was best was the help the worker was during the first few weeks. About 4 days after we finished the study we got a call about our son. They told us about him, and asked if we'd like to see him at a public place or at the foster home. We decided it would be better to see him at the foster home, that he'd probably be more comfortable. We decided yes. Then we worked with the social worker on the transition. She had made an adoption book for him. It is really fantastic. When he first came he used to read it everyday. It tells the whole story and tells it truthfully. It has lots of pictures about his past, and we added pictures as things went along. We had known there would be a courting period. We figured it out with the social worker as we went along. We decided on a minimum of 2 weeks, but

would see how things went. The worker went along on the first visit, and suggested that we take him for ice cream, so that we would have our own special family memory from the first. She suggest special things to do or say. Like when we went someplace special, like the zoo, we'd get a gift which he could keep at the foster home to kind of tie us together. And at first his foster sister would go along so he wouldn't feel isolated. I think it had helped too that the foster family had had another child adopted from them, and he kind of knew the routine. Everytime after we saw him we'd call the social worker and tell her what happened and plan out the next visit. It was all real good.

By and large, few later HTPs experienced such a useful placement phase. Most were like the early HTPs, pretty much on their own, with limited information or preparation, experiencing the same sorts of role incongruency.

THE AGENCY

For any child there is a transition, even a trauma, at placement. For many children the problems are exacerbated by an inability to conceptualize (name, define and deal with) the experiences and emotions involved. Reports of grieving, acting out, withdrawal, or angelic behavior are not surprising. Both children and parents need to be prepared for placement through a variety of informational techniques and through participation in the planning and implementing of placement. Presumably this in an area where the experiences of the adoption agency and worker are invaluable.

Most agencies are satisfied that their preparation for placement is adequately handled. Many suggest that most of the preparation takes place in the family study phase. This was particularly the case among

those agencies which tended toward an evaluative approach. These agencies rarely mentioned the sort of information which they considered crucial to a placement, especially in terms of what a family should have. Similarly they did not discuss the sort of preparation which they gave parents for the transition at placement. Indeed they were more likely to indicate that they stayed away or didn't call, to "give the family a chance to settle in on its own." One of the families interviewed, offered some useful insights on why such agencies seem to strenuously avoid giving information and preparation.

You have to understand that agencies thought their job was to find out that families were, so to speak, perfect. Once they decided that, once they said to a family, you're approved, then they could presume everything was going to go all right. If a family is perfect it can handle anything. It's as if the agency thinks that the family and kids are infinitely elastic. Then too, the agency didn't want to be proved wrong. So they'd just give you the kid with minimal information, and if anything went wrong it wasn't anything they did, cause they didn't do anything. Their last responsibility had been completed; to put a kid with a family they had found to be satisfactory. If anything fouled up it was the family's fault, because they were the only ones who did anything. Of course failing to do something is damaging, but it's harder to be criticized for sins of omission than sins of commission. Agencies want to be perfect, so they just narrow the area where they work and who they work with and they think they're safe from error.

In the evaluator role concept this perspective is correct. A worker who conceives of his role as screening out must proceed on the assumption that those who are screened in are by definition adequately prepared, family protestations to the contrary.

Agencies which tend toward the educative approach were those which showed evidence of changes in approach to the placement phase.

We routinely provide all the information we have on heredity and medical background. Then we give families as much background as we can get. This is especially true for older children. With them we want information on their previous behavior especially. This we give in written form to the family. We give them anything that can't be used against the child, like we wouldn't tell a family that a biological father was a bank robber. But we would reveal hereditary traits.

Here agencies provide all of the information, transition issues and the like with the family as a continuation of the basic "sounding board" approach which they take in the family study. With another agency the family becomes as knowledgeable about the child as agency staff.

Since we're placing older children, including some with emotional problems, to be successful for the kids and the families the families have to know a lot about the kids. For us what you call the initial contact and family study phase is all part of the preparation, since families decide for themselves to go on. Then when a specific child is suggested we review in detail the background with the family. The family talks with the child care worker, social worker and so forth. Then we all work out a placement plan.

Another agency consciously connected the placement phase with the earlier phases in the process.

Since we're asking families to invest themselves in these children we can't just cut off our involvement with the family study. The placement phase is a continuation. We have an interview with the family, and discuss in detail the child and the possible ways of fitting into the family constellation. When we've all worked through some of that, we'll set up a meeting with the child, and for older children a phased set of meetings. This keeps us involved as the family begins to experience the reality of the child, and vice versa. Kids and families are different. Everybody behaves differently than you expect. You can't predict so you help them learn about themselves and how to adapt.

Still another agency noted the inherent problems in creating a family by adoption, since most families have no personal experience of what is involved.

I think we now acknowledge that there are problems inherent in adopting, especially in adopting an older child. We're asking families to do a sort-of-unnatural thing. We're asking couples to take maybe an 8-year old, who might have had 8 moves, and undo a lot of those years. It's hard, and it has to happen in a very short period of time. We're asking people to parent a stranger. So we give more background information, more circumstantial facts. The family might meet the foster parents, which we never did before. There is more honesty, a mutual trust about what is going on and who is doing what. You're helping a couple to see themselves in relation to a kid, but you're a resource, you're not running it.

Even in agencies which are now tending to providing greater information and preparation for placement, the best means and format for doing so are still in the early stages of development. Most shifts have occurred within the previous year or two. As yet the agencies are undecided about the effects of the changes. Thus the placement phase remains one tending toward bureaucratic instability. Workers are not yet confident about new roles, and clients very often have limited experience on which to develop confidence about what their role entails, and what they require of agencies.

Chapter 12

THE TRIAL PERIOD PHASE

The trial period phase includes all that time between the placement of a child with a family and formal legalization of the adoption. It overlaps with the placement phase at the beginning and the legalization phase at the end. During the trial period the agency retains legal guardianship over the child and has, by statute and practice general supervisory responsibility. Though the term 'trial period' is distasteful to some, this phase of the adoption process has traditionally been a trial or testing time, to see if the placement will "succeed" or "fail." Most statutes stipulate a minimum time for the trial period, typically six months or a year, although provisions exist for legalization to occur sooner under certain conditions.

In most cases the trial period represented the longest phase of the adoption process. As such the variations in the experiences of different families are more noticeable. Variations tend to cluster around the unique attributes of the family and children involved. In every instance, families were straightforward in reporting the kinds of problems encountered. Most had an obvious ability to assess their seriousness.

Of course we had problems. Some things were pretty difficult. But nothing was any more extreme than for any of our other kids. It's always tough when you make changes in your family. But the rewards always more than balance out. That's kind of what loving kids is all about.

If there is any common feeling on the part of families toward agencies during this phase it is a vague sense of disquietude. This was not the case for every family, and was less frequent among later HTPs. But, with agencies often non-specific about their role and parents knowing that the child was not absolutely theirs, families often felt less than completely free to act as they otherwise might. For some the "Baby Lenore" case, in which the family left the state in which they were living rather than give up the child to the biological mother was a source of uneasiness. Other families saw the agency was a monitor rather than a helper. Whatever the reason in a majority of cases the disquietude was real and bothersome.

Experiences of Early HTPs

For most early HTP families the trial period was a time of limited, even perfunctory contact with the agency. For some this was a matter of indifference. Such families felt fully capable of functioning independent of any agency involvement. Most, however, resented the fact that the agency supposedly had a legal obligation but was doing nothing to fulfill that obligation. However, the general sense of having been 'tested' in the family study process in order to get the child was such as to work against the family initiating a contact with the agency in pursuit of some particular type of assistance.¹

It's not that I didn't like the worker or anything. It's just that she hadn't been around in about 6 months so she wouldn't really know some of the things about why the particular problem was happening. And then we thought well maybe they're leaving us alone because when they approved us they had confidence in us as parents and figure we can handle all of this sort of stuff. So in the end we just took care of it ourselves.

Many families reported that the trial period visits from the worker seemed mostly directed at fulfilling some sort of agency or legal requirement.

Our worker came only 2 times in the year. I don't know why she came then, since she never even asked to see our son, and hardly even talked about him. Mostly we talked about what was going on in the agency. I suppose she had to have something on the record.

But for many families there were problems or issues in which they felt the worker could have been helpful.

The first few weeks our son was with us were a very trying time. He was aware of what was going on, and screamed all the time. He wasn't old enough to verbalize, to explain how he felt or what was happening. Sometimes he would withdraw and say nothing. Nobody had really prepared us for this sort of thing. What made it easier was our other children. When they were around he seemed happier and could relax. But even at that he would take out his anger on his older brother--punching, hitting and biting. The worker called the day after placement because she felt so badly about leaving him with us in such a state. We could have had better follow-up; we expected her to come around. If she had come around we probably would have volunteered information about the problems and talking about them might have helped. But we never said anything over the phone. But I remember thinking to myself, my gosh what have we done to this child? I've talked to people since then and have been able to tell them to expect this sort of thing. At least people have someone to talk to now.

In situations where the fit between child and family is only slowly achieved the family's lack of helping resources makes things even more difficult.

When we brought him home I think he had a real feeling of being kidnapped, that he was in another house and didn't have any control over what was going on. At first he cried a lot, then he became noticeably less mobile. He wouldn't even cry, just a grieving sort of whine. Our other son would try to help by playing with him. By then we were afraid of doing something to put him out of whack. We started feeling that maybe this was the wrong decision,

and started feeling guilty, maybe we weren't good parents. Then the crying would start, and we'd get angry and then start feeling guilty because we thought we were rejecting the child. You knew you were going to love the child, but it was terrible not to like him. Finally one night we sat down and talked about it, because it was affecting our relationship too. And when we could talk about it we got a better distance on the problems. It would have been better to have someone who could have helped us talk about things, and suggest different perspectives. But our worker really wasn't available, and we were hesitant to call.

For another family the adjustment problems were more problematic for the husband than the wife.

I was getting along with our daughter well, although the battle of wits did affect me. But the crying and whining and wheedling really bothered my husband. The agency was no support. The worker was really female oriented, that came out even in the family study. My husband had to fight to get into the conversation! I think that's kind of in the woodwork in a family study, the presumption that the wife/mother is the only significant parent. Anyhow when these problems happened the agency was no support. The worker saw my husband as out of the house and not particularly important. And too because my husband is in a profession similar to social work I think the worker presumed he and we could handle things.

Worker presumption that placement will go easily because the parents have professional training in social work and or related areas (such as, nursing, psychology, child development, teaching, and so on) occurred several times.

I don't know if the worker didn't come around much because we both had professional training. But if that was the reason it doesn't wash. When you're going up the walls because the kid screams all the time and you can't figure out why because you've never been through an adoption before and nobody at the agency ever gave you any idea of what to expect and you're feeling guilty because you want to think you're a good parent but the kid isn't the perfect angel you thought you could raise, then by God you better believe that even if you're Sigmund Freud you need somebody else to give you some objective insights into whats happening and how to solve it.

For some early HTPs the dominant memories are of the uncertainty about having the child for good.

You're never really sure until legalization. It's not that we were nervous or thought he would be taken away. It's just as long as it's not all finished you're always slightly holding your breath.

For another family the possibility of the child's being taken midway through the trial year was startling.

We'd never really thought that the agency had any rights over him. He was ours from the first day. We didn't care that the worker didn't come around, because what could she have done anyway. She finally came after about 6 months, because she had to have something on the record. Well, to be honest, there had been some adjustment problems, and we had gotten through them by displacing against the agency. You know, things like they should have told us this, and they should have given us that information. It was better than getting angry at the kid. We were naive then, and just told the worker some of the things we thought the agency should do. We didn't pull any punches, and I think we indicted her pretty directly. She just calmly sat there and wrote it all down. Little did we know she operated on 'Don't get mad; get even.' About 2 weeks later we got a call from a new worker, who wanted to come out right away. We said we had just been visited, but if she wanted we'd see her the next day. She arrived and we talked about things for a while. After about 1/2 hour she said, Whew, I'm glad you're nice people, because I thought I was going to have to take X away from you. We went through the ceiling. We asked why, and she said, well here's some stuff in your file. And she read parts of it, the report from the last worker. Then we really felt powerless, because obviously the agency had already all but decided to take X, just based on that report from the worker. So we said, well let us tell you why she said that, and we went over stuff point by point, and asked her to put that in the record. Everything went ok then, because we got along with this new worker. But we did cover the other eventualities. We got our wills done to include X, we changed our insurance naming him specifically, and most important we told the people who would be our children's guardians if anything happened to us to come get the kids right away, get out of the state, and then let the agency argue. We also decided that if the agency tried anything we'd split first and talk later.

Though most families survived the trial period and its problems mostly on their own, some formed close relationships with other adoptive families, typically through ODS in its early days. These informal networks were the most important source of help for many families.

We went to some of the initial meetings. After listening to the various people talk we decided our problems were no different than those of anyone else. The fact that parents got together was itself supportive in a general way. We were always worried about telling the agency about troubles, because we were afraid of having the child taken away. It was hard to talk with friends because they would say well you knew what you were getting into. They'd blame the problems on the adoption itself. With other adoptive families you could be honest, because everybody knew what the problems were and was sympathetic.

Another family had similar feelings.

ODS was really what got us through that first year. It's not that it was really difficult, but it was really great to be with other people who had adopted, to see other trans-racial families, to see our kids with theirs, to see other people facing and solving the same kinds of things. You know, nobody was pretentious. They liked kids, and we could all help each other.

Early HTPs were, except for their involvement in ODS, essentially on their own during the trial period. Agencies made mostly perfunctory visits, and because of the underlying fear of the child being taken away, parents were loath to initiate contact with an agency or to express a need for assistance.

Experiences of Later HTPs

The experiences of later HTPs were more favorable, especially in terms of the resources made available by agencies. For only about half of the families was the trial period of perfunctory follow-up or anxiety regarding removal of the child. In most cases later HTPs

reported a positive relationship with the agency, often supplemented by useful involvement with other adoptive parents, usually through ODS.

Our worker was very good. She thought there was no one way of raising a family, so even during our study she mostly let us talk about our ideas. She continued that during the trial period. We'd talk occasionally on the phone, or at ODS meetings. She was mostly interested in what was happening and how we were handling things. We really never had much of any problem. We never felt there was a crisis. Most of the things which might have been never got that far, between the friends we developed in ODS and our worker.

The informal availability factor was stressed by another family.

I think we probably would have called our worker more. But she always was so busy. Besides there were so many people in ODS who were helpful. And you kind of form close friendships with a few other adoptive families and can hash out most things with them. But the few things we really needed from our worker she took care of. Mostly though we'd call our ODS friends. It's more informal. You can call nights or weekends and just talk, and not feel you're using up somebody's work time.

In some cases the worker played a more pronounced role in the trial period, especially during the early months.

When I look back our worker was really helpful. We were nervous as first-time parents, even after the group meetings. But the whole way through she was always ready to talk about how we felt, and what sorts of things might be puzzling, and always had some ideas which we might want to think about or try. Some we'd try, and others we decided not to do. She didn't mind either way. You felt she was happy just being able to give us some options. So we always were willing to talk over things with her. Our confidence came along pretty well then, and now we only talk with her occasionally. And too the group meetings with other families who have just recently gotten their child are frequent enough for us to get questions answered, or new ideas.

Another family encountered difficulties with an older child during the trial period. For them the availability of agency resources was extremely important.

Finally things got to the point where we said Look we might not make it. We could handle the child being emotionally upset, since we expected it. But it was the effect on us, and on our other kids. We finally called and said we might not make it and we ought to be doing some alternate planning. The worker said she'd be out Monday. (We called on a Friday.) I called her on the weekend and said that was just panic call, I'm pulled back together. But she said, No I'm coming anyway. And she did, once a week for four weeks. But the most helpful thing she did was get a pyschiartrist at the agency to back us up. We thought something we were doing might be making her worse. So in effect the worker arranged supervision for us, viewing us as therapists for the child. So we started taking notes on what was happening and what we were doing and how the child was responding. And we got feed-back from sending in these notes twice a week, both on specific points and on us doing a good job in general. And that relaxed us. We knew we weren't in it along. And writing things down meant that we could look back and see the progress. We should have been doing that all the time.

An interesting sub-group of later HTPs are the families adopting children from overseas. They are analogous in some respects to the early HTPs who adopted children from both Massachusetts and other parts of the U.S. For overseas adoptions, information on adjustment and on issues which occur during the trial period is in short supply. Agencies have limited experience with overseas adoptions. As a result families are pretty much on their own during the trial period. An informal network has developed in which some information is disseminated. This sub-group has developed an informational paper on the sorts of things to anticipate. One family which participated in the writing of the paper described some of their experiences.

We always tend to overestimate what we and our children can do. But the adjustments for an overseas child is really major. They are coming half-way around the world. Our daughter was 2 days in flight, and understandably arrived completely bewildered. Right away we had her checked by our pediatrician. But there are many exotic diseases for

which most doctors have no training, especially parasitical problems. We're all learning something about those. Then there is the child's orientation to the mother figure. There is a tendency to cling. But that is understandable too, because in Korea they are carried on the mother's back all day in a sling; they're used to a warm, personal closeness. And they have strange sleeping habits. They cat-nap a lot. And of course they are unfamiliar with U.S. furniture and kid apparatus. Our daughter began by sleeping on the floor, and we slowly moved her into a bed. And there are food differences. And on and on.

In such cases it was interesting to note how much the pediatrician and other parents with overseas adopted children replaced the agency and worker as key figures in support and problem solving.

When we were first thinking about it we really had no one to talk with, just the books we read. The first couple of months were tough, with sleeping and the diet. An ODS family was helpful then. Even though they couldn't answer all our specific problems, that they had been through it, that was very reassuring. Now there's four families in town with Korean infants. We stick together, call each other every time they burp wrong or something like that. We use the same pediatrician. That's a real help, for us all.

The group form of supervision, during the trial period received favorable comment from the few families whose agencies used that format.

The follow-up for our second adoption has been in a group. It's a miniature ODS-type thing. We had been in ODS. In fact it was another ODS family that really helped us over some rough spots with our first adoption, on grandparent reaction especially. So it naturally made sense to us to meet with people who you can draw upon during the time after placement. Our group was a continuation of the same people from the educational series. By then we'd really gotten to know each other. We could be blunt or direct with each other, and with the agency too. They learned a few things, I'll bet.

Another couple, for whom this was a first adoption, commented in a similar fashion.

The group really helps, because we know that the problems are not peculiar to us. It seems like you never have enough time at these meetings. We can go and talk about our son, and the people don't get up and walk away, they're not bored. We'd come home and tell our son about where we had gone, and that would provide a reason to talk about other things. It gave him a chance to ask things on his mind.

Many of the changes in practice during the trial period phase can be traced to the sort of role which ODS played informally through the early years of the placement of "hard-to-place" children. Later HTPs were more likely to have a positive, helping relationship with the agency, whether individually or as part of a follow-up group. This represents a substantial change from the almost exclusively perfunctory relationship with early HTPs had with agencies during the trial period phase.

THE AGENCY

If there is any common change among agencies regarding the trial period phase it is that they are more willing to acknowledge the variety of problems which families might encounter in fitting in another child. The assumption is that it is better to work through these problems than to remove the child.

It may be saying the obvious but the reality of the child is never as immediate as when he actually comes on the scene. We're very active with the family at that point. We feel it's our job to help a family get a handle on a child. We need to learn how to give insights, to families and kids, about what adoption means. To do that and learn that we have to be around then. In the family study and at placement we tell families that we are as

available as they need us. We usually have frequent phone contact. There are some families with whom you can't get over the feeling that the agency is "The Inspector," but they are fewer than previously.

Another agency point was more realistic about problems in placements.

We haven't changed our procedures much. We still see families monthly for the first 6 months, both in the home and the office. But we let them know that they may use us more frequently. We let them make the decision. Usually it depends on what the family needs, and the child needs, and how they are working things out together. When families make greater use of us they often ask us to help explain the reality of problems, like an acting-out kid, what it means, and to review again the information, to assess the family interactions; to understand the "testing." We're doing much more direct counseling and being supportive. Families are less hesitant to make use of our other services.

Most agencies tended to see the trial period phase in relatively non-specific terms, and consequently had no well-articulated approach. There were a few exceptions. One agency, with a well developed educative approach to the adoption process, was more definite about the sorts of activities during trial period and the sorts of roles the various participants were likely to carry out.

We see people in a dynamic sense, with a long term commitment to them and the kids which we place with them. We see our role as counseling, as facilitating, and as administering for those kids who are placed in permanent foster care. Every year there is a treatment planning conference for each kid. At the conference the parents play a central role, they help establish who is going to do what for the coming year. This includes adoptive placements which have been probated, since we base it on what is needed and who can best provide which. For example families continue in supervision groups based on the use to them, and irrespective of the legal status. In the treatment conference we make use of resources of both this agency and elsewhere. Between us and the family there is a good range of knowledge about available resources. Then the family chooses the configuration of servicing sources.

As with the placement phase, the changes in role conception for the worker have been recent. Workers therefore are still lacking confidence about the suitability of new approaches. Families have not been fully confident either, as the lingering disquietude about potential removal of the child is a continuing barrier to disclosure of what worker roles might be helpful. This the trial period phase remains one tending to bureaucratic instability.

Chapter 13

THE LEGALIZATION PHASE

The legalization phase takes place when a family prepares for and goes to court to have the adoption finalized by legal action. Typically this occurs soon after the completion of the minimal trial period mandated by law. Though it is the phase of the adoption process with the longest standing it is now in most cases a perfunctory activity. However, because it is legally mandated, and forms, in statute at least, the keystone for the rest of the adoption process, the legalization phase remains an important part of the process. The occasional recourse to law by biological parents, and the occasional unanticipated rulings by judges hearing adoption cases underscores the importance of the phase. Such instances are often well publicized. The 'Baby Lenore' case is an example of the biological mother exercising a claim over the child prior to finalization of the adoption. A New Jersey case in which the judge denied the adoption petition because the family did not believe in a "Supreme Being," even though the agency supported the petition, is an example of the courts reasserting their role.¹ Both examples illustrate the original intent of the hearing as the primary time and location for determining whether or not the public interest and the best interests of the child are being met by the proposed adoption.

THE FAMILYExperiences of Early HTPs

Without exception the early HTP families recalled the legalization phase as "routine," "perfunctory," "sterile," and "disappointing." For some the low-key aspect of the legalization phase was quite acceptable. Their sense was that the adoption had already occurred and that overdramatizing the court-related aspects was pointless.

For us the legalization was a technical formality. We didn't see it as a substantive part of adopting a child into our family. So we didn't want it to be ceremonial. In fact with our second adoption we arrived at court, and the clerk said, Not today, it's a lousy judge. He said, Look, I've seen the child and the social worker. The good judge is coming in tomorrow. I'll put the order in front of him and he'll sign it; don't bother to come back. And we were quite content with that arrangement.

Most families had expected more of the legalization and were disappointed by how little importance the courts and the agencies seemed to attach to the event.

We thought of going to court as a very special thing. I had expected someone with whom we had contact to be there, like our social worker. But a secretary from the agency was there to present the material. The judge didn't do anything special. All I remember was the kids running around.

For another family the general atmosphere of the court was as disappointing as the perfunctory quality of the court procedure.

We really had high hopes for the day. It was bright and sunny and we were really up for it. Our son's godparents came along. When we got to the courthouse we had to wait in the corridor about 45 minutes. In that Probate Court they were also hearing divorces, so here we were amidst all these lawyers and people staring at each other with real hostility. We finally got into the courtroom and



Room 14-0551
77 Massachusetts Avenue
Cambridge, MA 02139
Ph: 617.253.2800
Email: docs@mit.edu
<http://libraries.mit.edu/docs>

DISCLAIMER

MISSING PAGE(S)

(Pg. 206)

Another family had a similar experience.

We waited a long time to go to court, 20 months. I find that very annoying. They claim it is the backlog of paperwork. After about 15-16 months we began making phone calls to get them moving. Not that I was nervous that anything would happen. It was just that going to court was supposed to happen, and I wanted it to happen when it was supposed to. And it was holding up our application to adopt a second child. When we finally got to court we had to wait about 2 hours in the corridor for something that took only 5 minutes. Then the judge didn't even look up and acknowledge that we were there. It was like an assembly line. The judge actually knows nothing. The thing is meaningless.

For some families the agency felt it had to pick the proper judge, especially in the earlier days of placing black children with white parents. Roughly half of the families reported this as an important part of their legalization process. For one family the legalization process had an ironic quality in this regard.

We had first called one agency, who told us our prospects weren't good because of the religious and race issues. The judge in our county just wouldn't make the placement. We went to another agency, who made the placement. When we ended up in court it was with the judge the first agency said wouldn't do it. It turned out he was very charming. Obviously the first agency didn't know what they were talking about.

For most early HTPs the legalization phase was perfunctory. considerably less traumatic than they had expected and occasionally an impediment to moving ahead on another adoption. Despite the general blandness of the treatment received during this phase, most families agreed with the family which said

Even though there wasn't much to it, it meant we could breath freely for the first time in a year. I remember being surprised at that reaction. I hadn't felt worried or anything, but now he was ours for sure.

Experiences of Later HTPs

The experiences of later HTPs during the legalization phase were not substantially different from those of early HTPs. In general the reports continued to stress the 'perfunctory,' 'disappointing,' 'routine' aspects. There were occasional reports of a positive experience during the legalization phase, but these were rare.

Most later HTP families had an experience much like that described by the following family.

We finally went to court. It was very perfunctory. For us it was a real anti-climax. We had been put through so much, and it was ending with so little.

Another family also noted that going to court was anti-climatic, but that it had other positive features.

Of course going to court was an anti-climax. But it was also nice because it meant no more workers. In a sense that balanced out how dull and pointless the actual legal stuff was.

Among later HTPs many more families expressed disappointment with the perfunctory quality of the legalization phase. They were more explicit about linking it to the need to make more important, even ceremonial, the finalization of what for them is a big step.

Finalizing an adoption is one of the few really positive things a court gets to do. You would think that they would make more of an occasion of it, make it ceremonial.

The sense of emotional release was often expressed by families. Many later HTPs had been told not to expect much from the court appearance. Nevertheless they often admitted that considerable emotional energy was invested in the court appearance, and that when they thought about it legalization meant the release of inevitably lingering concerns, and a great sense of relief.

Legalization took place 6 weeks after the year was up. We had wanted to have legalization completed before we took a long vacation trip. We were assured this could be done, but it got postponed because the agency wanted a large enough group to justify a trip to the courthouse. The legalization was a terrible anti-climax. It took longer to drive to the courthouse than it took to negotiate the legalization. The judge just looked up kindly at us and said, You've got a mighty fine son there, take care of him. And out we went. And it was like, Gee this is really an important day--Ho hum! Nobody ever lead us to believe it would be significant. But the feeling was an immediate sense of relief. The agency and court take it all too casually. No matter how confident you are, you are on probation before legalization. And it's a big thing to be sure.

One family had completed two adoptions, with two very different experiences.

On the first adoption we were anxious to get to court. Always in the back of your head is always the thought, until it's all legal you're still vulnerable to the agency or biological mother. We were 2 or 3 months late going to court. All their were were adoptions that day. It was an unbelievable thing. The formality of the courtroom, and all the kids racing around. The judge walked in, and wouldn't crack a smile. It is unfortunate that they have to go through all that decorum with children. We went up, and he stayed stone-faced. It was a happy day to get it done. We took pictures in the courtroom too, which I don't think he was terribly happy about. The second legalization was different. The courtroom was mobbed again, this time with divorces too. But the judge was super. When it was our turn to go up there, he put down everything. He didn't care about anybody else in the courtroom. He just held our daughter's hand, and did like a grandparent would do over a baby. He talked about how wonderful it was. He made us really feel good.

This positive experience was, however, mostly the exception. Both early and later HTPs found the legalization phase perfunctory and anti-climatic, a technical phase oriented mostly toward the court and worker. As one family said

For all we were needed you could have done it through the mail.

THE AGENCY

Most agencies have not made changes in the nature of the legalization phase, and tend to continue to view it as a technical procedure of relatively limited importance. There is a distinct propensity to play-down the court appearance. Thus one agency, when asked about the legalization phase, described in some detail each step of the procedure used to make certain all the legal documents were in order, and how they made certain the "proper" judge was sitting when an adoption petition was before the court.

There was some evidence that agencies were aware of the importance of the legalization phase to the families. As with other phases, differences among agencies tended to relate to whether they used the educative or evaluative approach to the adoption process. Agencies using the evaluative approach were less sensitive to the concerns of families regarding legalization.

The new 6 months rule hasn't been any help for us. Now families come rushing in for finalization before we have even had much of a chance to assess how the placement is going. It's very difficult to get a family to agree to an extension of the trial period, even when that seems indicated by our professional assessment.

Agencies with an educative approach tended more to talk about the families' reaction to legalization, and how they prepared them for it.

Most couples are disappointed with court. They seem to want a ceremony, almost like a marriage. Some judges make it personal, but it depends. So we try to give them some idea of what to expect.

One agency reported that one judge recently appointed was making some major changes.

We go into the judge's chambers. It is more informal. The judge usually asks a few questions. This new judge is an adoptive parent himself. He puts a lot into it. The adoptive couples bring cameras. The judges will put on their robes and pose with the family. If there are older children involved they'll go out of their way to involve the children. They make it a very special day.

Another agency talked about its policy on legalization in terms of a continuation of the overall educative approach.

We try to be flexible about going to court, making it more a matter each family's particular situation. This we try to fit into the general approach of helping families to learn and decide for themselves. We've tried to help families understand that some things take longer to achieve than others, that going to court is a big step and that everyone ought to be ready. When the family is ready, the child is ready (especially with an older child) and so forth, then we go to court. There is no question that in most cases going to court is anti-climactical. We do have the hearing in chambers. Some judges will make some remarks, and do things to make it more personal and special for the family. Even so it is a pretty quick procedure. So we tell families, Make your own occasion.

Yet another agency emphasized that the legal arrangements were now a secondary consideration to the human dimensions. From the outset the emphasis is on the particular requirements of the child and family in each situation.

There was one case where a couple came saying that they wished to adopt an older child. They entered our educative series. Eventually they decided they were interested in taking a child permanently, in whichever way was best for the child. We placed a child who was legally freed for adoption. At the end of a year and a half the child is still saying I'm not yet sure I'm ready to make that commitment to this family. We have a family who is flexible enough to go along with that, in terms of where this child is and how ready the child is to make or not make a commitment to them. They don't feel they have to

force the issue. That has to do with the joint approach with them, that they shifted from coming needing to adopt to, a position where they are flexible about the child's needs as well as their own.

Even in cases where agencies used the educative approach the flexibility in the process was invariably restricted to the agency itself. None of the agencies had any regular contact with the courts in other than the formal situations of presenting adoption petitions. Thus even where agencies were aware of families feeling strongly about the need for changes in the manner in which the legalization procedure takes place, these were not communicated to the courts or judges involved. Indeed the only agency reporting a change favorable to the sorts of things families felt to be important noted that it was instituted by the judge, who was himself an adoptive parent. The agency had not formally communicated with him on the issue. Similarly in no case did the agencies report any formal way of communicating to adoptive parents on the various legal issues attendant on adoption, either in terms of the formal process of the active phase, or the various statutes pertaining to the status of an adopted child.

Chapter 14

THE POST-LEGALIZATION PHASE

The post-legalization phase follows the court's adoption decree. As was the case with the pre-contact phase, there is little treatment or acknowledgment of this phase in the literature. A primary purpose of this chapter is to reflect on some of the issues and questions relating to the post-legalization phase. Among such questions and issues are, what sorts of resources does a family require over time? Which of these relate to simply being a family? Which relate to being an adoptive family? Which relate to the particular sort of adoption--trans-racial, handicapped, older child, sibling group, etc.,? What is the agency's responsibility to make such resources available? What sorts of follow-up should an agency do? What sort of research should an agency be involved in? What other sources of assistance do families use other than agencies?

THE FAMILYExperiences of Early HTPs

Almost without exception early HTPs had no contact with the agency regarding the initial adoption once with legalization of that adoption completed. There was no discussion by the agency of such service being either needed or available. Insofar as most families were concerned the agency's position was that once the family was approved and a child placed, agency responsibility was essentially completed.

Of course we were on our own after court. I don't know why I'd have thought otherwise, since we'd been on our own (except for ODS) all the way through. The only thing the agency wanted was to meet its check-list. Once we met the minimal criteria they'd fulfilled their responsibility. I don't think they really cared if this was the best outcome for the child, just that it was minimally adequate. But it would have been nice for the agency to say, you might encounter this, or if that comes up give us a call. You expect professionals in a field to know something about it, but in adoption the real "pros" are the families. They were the ones who told us what to expect, and if something came up to give a call. I don't know how families got along before there were parent organizations

Though the sorts of things about which an agency might have been predictive or helpful varied from family to family, families were not hesitant to suggest that they felt the agency could have played a role.

You know even though there is a lot of talk among adoption professionals about how to talk with a child about being adopted we never got any preparation from our agency. And the stories which some agencies suggested to some friends of ours were just too simplistic to help. Also I really don't think it is efficient to suggest a given approach during the family study and figure that will do the trick for the kid's whole life. I think the agency ought to be ready to have parents come back in and talk over the particular characteristics of the kid and develop some approaches relating to the kid's real life situation.

For another family the central concern was the added emotional burden which adoption puts on a child already experiencing emotional problems.

Adoption is hard enough for adults to understand. It's really a trip for a kid. Are you really my parents? What about that other lady I used to live with? Will you give me away too? All those things. That takes a different kind of therapy, a particular kind of understanding. Agencies ought to be more active in this area, especially as more older kids are placed.

For many of the early HTPs an important question was race. In some families the black children whom they had adopted were in school, and HTPs were encountering the impacts of institutional racism. One family living in a Boston suburb told this story.

In school they have really managed to make our daughter feel different, and because she isn't quite as bright as some others she feels "stupid." It is supposedly an open classroom, but the children earn points for what they do well on, and it is a very competitive situation. She feels dumb, because everybody helps her, and she can't help anybody else. So we talked with the teacher, who is very conscientious, though set in what she wants to do. First of all she isn't used to handling children like our daughter (who is black). She said, our daughter is not in her environment. If she were in the Boston school system she'd be better off, because she'd be average there. But here she just "shows her inability to learn." The teacher is just uncomfortable dealing with our daughter at all, knowing what to say. So our daughter can do almost anything she wants to--there are no limits, or there weren't until I went to school and told the teacher. What it comes down to is, we've got a black child in our class and what we do we do? They expect only white, middle-class achieving kids. The teacher was doing things like letting her go off to the bathroom and not come back for 45 minutes, just to get the problem off the scene. How is she supposed to feel anything but dumb if the teacher doesn't care about where she is and how long she is gone.

Another family had contemplated calling on the agency for assistance but decided the particular problems probably wouldn't be handled well because of the single purpose of the agency's activities.

There was one time we said we ought to call the social worker, when our son was acting out a lot. But we thought that the agency probably wouldn't be able to do much of anything, because all it knew about was placing kids for adoption. So we called an ODS family we knew and kind-of worked it out that way.

Another family had a similar situation.

Every now and then things get rough. A problem will come up and you consider that the fact that some of your kids are adopted and others aren't might be contributing to it, you know, differences about how a kid is incorporated into the family and so forth. But we rarely think of going to the agency with it, because they never gave us any idea about those sorts of things to begin with. Why should we expect them to be able to help now?

For a family which adopted several times from the same agency the turn-over in staff was a barrier to using the agency for other purposes than placement of a child.

Things change, and the people whom you know well enough to talk with often leave. What's most distressing is that the level of sophistication seems to be more a function of the specific persons involved, their knowledge and ability, than of the agency itself. Our agency was clearly getting worse, so there was no reason at all to think they would be of any use.

Most families found other ways of coping with issues as they arose. Many turned to the Open Door Society, its area groups and personal friendships formed through it as a primary helping source.

Mostly when things came up we'd call other families who adopted about the same time we did. We met them through ODS.

In most situations this proved to be satisfactory, though occasionally the particular nature of the problem occasioned the need for other resources.

Most of the time this informal route solved things. Other families could give you perspective, different ideas, and that was what you needed. But sometimes that wouldn't work, for example, other ODS families weren't black, and couldn't provide insight into the black experience.

Experiences of Later HTPs

For later HTPs the experiences during the post-legalization phase are quite similar to those of early HTPs. There is limited agency contact, considerable reliance on the informal ODS network, and a rough comparability in the types of issues which are seen as important. The one difference is that informal contact with the agency is somewhat more likely to occur because of close friendships formed with the worker.

By definition later HTPs have had their adoptive children for a shorter period of time, often have not concluded enlarging their families and therefore are also likely to be in the process of another adoption. Thus whatever post-legalization contact might be seen as desirable is often handled as part of an earlier phase in the process for another adoption.

Many more later HTPs than early HTPs established close relationships with their worker.

I always felt and I still do that we could go to our worker. She's a sensitive person, a friend really. We could talk with her about anything and she'd help us out. Once when we had gone to a conference on adoption we called her to tell her about it. She was really interested in everything that was said, and came over that night just to talk with us about it.

Another family had a similar experience.

Our whole relationship with the worker was really pleasant. It was more like making a friend, which she still is. She was one heck of a professional; she really knew her stuff, and did a good job with us. But that didn't get in the way of her being a human being. She'd drop by, and we'd have a fire in the fireplace if it was a cold evening, and we'd end up with our shoes off and our feet curled up under us and drinking beer and chatting away like mad. It was more like having a friend in. We've never hesitated to call or talk with her about anything, now or then.

Several families were still in the process of expanding and as a result had ongoing contact with an agency.

There really hasn't been a time over the last couple of years that we weren't somehow formally involved with the agency. So every time we had a problem, if I thought the agency could do anything about it, I'd bring it up with the worker. But usually I'll call another parent first.

In a few families the ongoing contact with the agency related to being a resource for the agency's adoption program.

Our worker has had us come back to an orientation group to talk a couple of times. That's probably the only time I'd think of talking with the agency first about a problem, you know if it was happening right then. But when you talk with people who might adopt you always tend to put it in terms of what happened to you, and some of the current problems occasionally get talked about then.

Many of the families were taking active roles in adoptive parent groups, such as Open Door Society and Friends of Children in Vietnam.

We've never called the agency for help, though they made it clear from the very beginning that it was a place we could come for help. Going back to the agency depends very much on the type of help we need. Most often we'd go to a supportive group of lay people. Peer support more than anything is most important. Most of our support came from ODS. You really appreciate the ODS people who helped you through and you feel you owe it to people who will adopt after you to spend some time in ODS being helpful in the same way.

Most of the later HTPs saw as potential problems the same sorts of things as early HTPs.

What do we think might be problems? Well for us one thing is race, giving our child a sense of black identity, history and a sense of himself in our family. Part of that is that it means to be adopted. Though our child was young when he was placed, from what other parents say those with older kids have special concerns about emotional adjustment, about resources for kids with handicaps (like school system stuff).

Few saw the agency as the proper place to go in relation to on-going problems. The one exception was found among families involved in adopting through the agency with the most developed of the educative approaches.

The whole openness of the workers and staff about the kids, and all that we learned by going through the process really makes us believe that when things come up that's the place we'll go, because we know they can help, and how they can help. And with the yearly treatment conferences we're regularly scheduled to do just that.

THE AGENCY

In traditional practice the relationship between the agency and family was terminated with legalization. This was, as one worker said, "the expected practice with infants." Though occasional reports were published of problems associated with adoption, agencies did not have any regular means of contact with families after legalization. One agency attributed this to the traditional role which an adoption agency was supposed to fulfill.

Agencies reflect society's attitudes, they institutionalize and perpetuate them. For a long time it was thought that parents were supposed to look like kids, and vice versa. So we had infertility and matching requirements. In the same way families in general weren't supposed to need help in raising their children, so agencies were supposed to leave them alone once the legal requirements were satisfied.

Some agencies, usually those tending toward an educative approach, reported an increasing openness to being a resource for families after legalization.

Families are conscious of the issues of the future. And we try to help make them more clear for them during the family study especially. After legalization we let them know that we are one of several resources they might want to use. We make referrals; we don't try to everything. Very often other families become resources.

One agency pointed out that one advantage it had by virtue of being small was greater accessibility.

Being small it is more possible to leave open the possibility of contact. Usually the same worker can be available to field questions and act as a referral sources. That facilitates the use of our agency for problem-solving.

Another agency made an effort to tie together its orientation and family study program with continuing availability as a resource.

One of the things we stress right from the beginning is the availability of the agency throughout the duration of their existence as a family. This is often more critical during the first few years. You know if there is a problem or something they're anxious about it's often easier to talk about it with somebody not so closely involved. We talk about the sorts of resources we have available, like a clinical psychologist, and the sorts of things those resources are useful for. Or we talk about referrals, and what other resources are available, our contacts in other agencies. Like in one family there was a question of deafness in the child. It was going to take 6 months to have the child tested. But because of the contacts of the agency we got the testing done right away. We could alleviate the worry; there wasn't anything wrong with the child, and they didn't have to undergo 6 months of uncertainty. The group meetings are like training in family life. Things are so complicated these days it makes no sense not to make use of helping sources. So we try to overcome that myth about getting help as an admission of failure, and talk about it as a positive response.

Another agency had a similar perspective.

The availability of the service is in itself a service. People say, that's nice. Now when we have questions we know where to come.

Since an adoption agency is often a family's first encounter with the social service system providing knowledge of the availability and utility of such services, including but not limited to adoption, is seen by such agencies as a positive broader contribution to families.

Even though agencies were expressing greater willingness to be used as resources after legalization, few had any systematic approach to making the resource available, or to what sorts of resources they uniquely could offer. The general absence of longitudinal research on adoption and the traditional posture of considering the adoption

finished at legalization have combined to render agencies surprisingly ignorant of what resources are needed, and how they might be organized.

CHAPTER 15

CONCLUSIONS

System change in the adoption process is best understood within the context of client-bureaucrat exchange systems in public service bureaucracies. Bureaucrats in such settings are faced with the dual compliance dilemma, needing to resolve tensions between imperatives for public good and imperatives for personal comfort. In facing this dilemma bureaucrats seek stability. The degree to which such stability is achieved results from the confidence which bureaucrats and clients have regarding their own role concept, and the extent to which these role concepts are congruent. Looking with close attention at these factors provides a means for understanding the nature of change in adoption.

SYSTEM CHANGE IN THE ADOPTION PROCESS

The history of adoption through the watershed years of the mid-1960s shows steady professionalization. This professionalization yielded a client-bureaucrat exchange system of considerable stability. Beginning with the watershed years, however, a number of factors arose which created new strains and instability. Central among these were the inclusion of families with biological children in the adoption pool, development of educative roles for the worker, the establishment of active groups of adoptive parents, and the presence among workers of "innovators" oriented toward change in the adoption system. In the midst of this

situation of bureaucratic instability a number of changes in the adoption process occurred. However, change was not universal, nor did it take place in each phase of the adoption process. In only four of the eight phases of the adoption process was change of any significant extent discernible.

Pre-contact

The most significant change in the pre-contact phase was apparent in the knowledge and preparation which families have of adoption prior to making an initial contact with an agency. This change is almost totally the result of the activities of parent groups. Parent groups could take a dominant role here because traditionally agencies have seen no role for themselves in this phase. After parent groups had established an active role for themselves here, agencies have been unable to determine what they might appropriately do.

Traditionally agencies have assumed that the initiative for the initial contact (i.e., formal entry into the system) rests with the client. This remains the operating assumption for most agencies despite the more general change in this phase. Thus no agency had what could be considered a significant out-reach or recruitment program; no agency carried on any research into what constitutes successful means of attracting potential adoptive families; no agency evidenced particular knowledge of the qualities and composition of the changing constituency of adoptive families. Rather agencies seem content to accept whomever calls or is referred, from whatever source. This stance reflects an exchange situation of greater stability. If agencies were to recruit or

to carry on educational campaigns, clients would enter the system with greater confidence in their role, as they would be (1) part of a sought constituency and (2) imparted with greater information about their role. This tends more toward a situation of bureaucratic instability. It is not likely that bureaucrats would willingly embark in such a direction.

However parent groups were able to do so when the traditional role of the worker proved unequal to achieving the imperatives for public good which even the workers allowed ought minimally be achieved. The worker's traditional role typically was challenged by evidence that large numbers of children were not being placed. Often the evidence was made public by 'innovators' in the professionals' ranks. Thus clients were provided the opportunity to increase confidence in an altered role for themselves. The Montreal situation is illustrative. An innovative director made available information that large numbers of children were not being placed, apparently as the result of a systematic failure of the bureaucrats' role concept. This apparent cause was confirmed when a concerted, year-long effort using traditional approaches resulted in few placements of these children. A shift in role for worker and client resulted in three placements within a week. Increased client confidence in a new role lead them to suggest an altered role for the agency:

This group of parents...expressed great concern for the fact we had had these children buried. They have been wonderful people to work with, and they have always been exceedingly frank, so they let us know in the beginning they did not have a high opinion of our public relations ability. They realized that these children had been available and nobody

had ever heard about them. Why couldn't they get into the act and help tell the world that these children exist?1

This changed role for clients was formalized in recruitment and educational efforts on the part of parent groups. The differences in preparation reported by early and later HTPs indicates the extent to which clients have effectively carried out this new role. That agencies are at best marginally involved during the pre-contact phase shows the continuing lack of confidence possible in bureaucrat roles during this phase other than non-involvement.

Initial Contact

There has been a general change reflected in increased use of group orientation meetings. Though most agencies use group meetings there are differences in content and purpose. These differences result from the agency's views on the workers educative and evaluative roles. Those seeing the worker as evaluator use the group meeting to make more efficient the dissemination of information about their procedures, and to allow families unable to adapt themselves to these procedures to withdraw. In such agencies families attend only one such meeting, and provide an audience for the agency's presentation. Agencies seeing the worker as educator tend to provide a series of meetings which are participatory in nature. They provide a range of information on adoption issues, using as resource persons in addition to the agency's adoption workers.

Agencies which had shifted to an educative approach during this phase often did so at the insistence of clients. They were often

agencies more active in placing "hard-to-place" children. Here the broader constituency and increased confidence of HTPs in their own wisdom regarding the children they were adopting prompted them to demand changes in other parts of the adoption process. Since the HTPs were succeeding where the agencies had previously failed, worker confidence was lowered. In short, workers were prepared to accept direction from the clients. As one agency reported, early HTPs often "supervised the workers" in post-placement follow-up, and were forceful in urging changes in the process. Individual client confidence was reinforced by participation in parent groups. The "dialogue sessions" held between ODS and various Boston-area agencies are one example of direct communication of altered role expectations.

Whether the educator or evaluator role concept was dominant the outcomes tended toward stability. The educator role is congruent with the client role of resource, which is the general approach publicized by parent groups. Agencies using the evaluator tend to have higher attrition rates, so that families remaining are likely to accommodate themselves to a congruent role as patient. However, the difference between that role and the more publicized resource role remains evident, so that even though this situation will tend toward stability there is residual resentment on the part of clients.

Family Study

Because the family study phase has been at the heart of the adoption process, changes have been most evident. There is no question that in studying families most agencies are less reliant on traditional

criteria, such as income, education or nature of dwelling, than they once were. Rather than what criteria are applied, the continuing source of instability in this phase is over role definitions, that is who makes the determination of an acceptable adoptive placement. Agencies array along a continuum between a worker role of evaluator and educator.

The evaluator role is very attractive. It carries with it the weight of tradition, of accumulated professional experience and familiarity of procedure, all of which tend to increase role confidence. Since a main premise for the evaluator role is that in screening a public good is realized, a number of procedural efficiencies are cloaked with normative validation. For example any reduction in clientele which results from client disagreement with the routines is not a repudiation but a verification of the utility of the routines; the routines themselves serve to screen out clientele which workers otherwise would have been required to screen out through more laborious methods.

In this study those agencies which were more likely to use the evaluator role in the family study were those with the largest professionals staffs. They were more likely, therefore, to have traditional professional viewpoints reinforced, both formally and informally.² Strong support from a professional peer group is more likely to lead to a situation of bureaucratic stability based on traditional bureaucrat roles. These agencies, because of the numbers of workers, are less likely to be susceptible to the impact of clients on individual workers, or to sustained contact with several families or an organization of families. Worker contact with other workers, by frequency alone, is more

likely to make professional criteria the main frame of reference, and increase worker role confidence. The predominance of professional theories of action is likely to continue even if the data by which they are justified is stereotypic or over-simplified. In such situations self-fulfilling prophecies and acceptance of illustrative validation are often the technical grounds on which high role confidence is maintained, and conditions for bureaucratic stability preserved.³

One agency in the present study exhibited such a process. It originally changed to a more educative approach including the use of group orientation and study meetings. The change was in part prompted by external forces, including ODS discussions with the agency, demand generated by ODS publicity regarding the availability of "hard-to-place" children, and by an innovative director proposing new theories of action. After a period of time using the newer approach the agency's staff, which was relatively large, became restive with their apparently decreased role in the process. Though workers felt their job was, among other things, to rule out traditional pathology, they felt unable to exercise this responsibility. Rather they felt that they were being forced to sanction, essentially without question, the motivations of the families coming to adopt. The evaluator role remained compelling in its potential for high confidence, but families were now confidently entering the exchange system as resources. The workers felt they were being forced into a role about which they were unclear and lacking in confidence. In this agency, with a large staff, the professionals began to confirm their mutual uneasiness by beginning to find examples

of problems with placements they made. They also developed certain stereotypes regarding families, notably among those adopting trans-racially. (These concerns were reinforced simultaneously by the growing public expression of concern over the practice by trans-racial adoption by organizations of black social workers.) Thus workers characterized some trans-racial adoptive families as thinking that love was the only necessary ingredient. Illustrative example then convinced the workers that such families were adopting to confirm their own liberalism. In many instances, they said, families would put the child in conspicuous and attention drawing situations, seemingly insensitive to the effects on the child. To the workers this justified their reassertion of an evaluator role. In particular this took the form of "emotional matching" of families and adoptive children, a more assertive and demanding role in the group family studies, and the requirement that the worker must be "comfortable" with the couples' decision. Although the former practice of individual family studies with worker dominant in the decision was not re-instituted, many other elements of the evaluator role were. This shift back toward an evaluative approach was taken without firm data (the agency proceeded to change in the absence of research, and on the grounds of the experiences and impressions of the staff). It also occurred after the "innovator" director had left the position and been replaced by one more traditionally oriented, and after the ODS dialogue groups were discontinued. Thus the re-introduction of the evaluator role was possible in the absence of conditions leading to decreased confidence of the bureaucrats in their role concept.

Bureaucratic stability was acquired by workers finding strength in their professional peer network, and accuracy in their theories of action (even though the accuracy was demonstrated by means other than vigorous research.)

This particular instance provides evidence of yet another reason why public service bureaucracies with large professional staffs serving clients on essentially an individual-by-individual basis are likely to be swayed by professional criteria. The agency had shifted toward an educator role for workers and had accepted the client role as resource. However, particular clients come and go through the adoption system. If only one adoption by a particular family is involved, the length of formal contact can be less than one year. Thus no systematic and consistent representation is made of the client role by individual clients. No agency had any regular arrangement for meeting with an organized adoptive parent group. ODS did hold a series of "dialogue meetings" with agencies during its early years, but has not done so since 1970. In the absence of any consistent client input it is not only probable, but understandable, that professional criteria would begin to predominate.

Having an innovator as an agency director is one likely counter to the force of professional tradition. In this situation the most advanced professional (director) formally counters what informal feelings the staff may have about diminution of traditional professional role. Indeed changes in the agency process initiated by the innovator are likely to begin to create new definitions of standards of acceptable professional practice. Such a person as director is also likely to have personal ties

with client groups. In this manner regular representation of client role is achieved, with congruency a more likely exchange outcome.

The various approaches to the family study phase now utilized by agencies in each case represented a conscious reaction to what the agency perceived as a different role concept on the part of potential adoptive families. No matter what the resolution, the process of re-examination of the agency's approach to the family study phase was precipitated by a perceived change in the client. The broadening of the pool of adoptive parents to include families with biological children, and the trend toward a lower median age of parents at time of initial placement are two particular traits which have had a central impact on the family study phase. Both are important features demonstrating the significant change in role toward that of resource, and the high confidence which clients have. Previously families were infertile and had waited many years to be certain that they could not have children biologically. Both of these conditions meant that their choice of adoption as a means of family expansion were, in effect, involuntary, and their role confidence low. Adoption was the second of two options, and one resorted to only after the primary choice was clearly impossible. The newer group of adopters had in most cases already proven a capacity to have children biologically. The lowering median age also shows that they were not out of the primary years of reproduction, and thus were making the choice of family expansion by adoption over biological means. They were, therefore, completely voluntary in turning to adoption, and confident in their role as resource. In the encounters between the early

HTPs and agencies, when workers still perceived of their role as evaluators, the impact on the family study phase of incongruent role concepts tended either to be direct and explosive, or roundabout but nonetheless significant. In the more direct encounters the role incongruity became overt. Families and workers battled over control of the process. Thus one family, considering the questions of the workers "silly," took control by demanding directly whether or not she would place a child. The positive response meant that the roles in the family study were irrevocably changed. The family cooperated in order to get the paperwork done to effect what had already be decided on their initiative.

These more direct encounters had an effect primarily on particular workers. The overall impact came in a more roundabout way. Early HTPs, when confronted with the evaluative approach during the family study, were more likely to respond by quickly learning the rules of the game and presenting the correct responses. Many reported that they had "manipulated" the worker, had presented "Mr. and Mrs. Perfect," or had otherwise controlled the process to achieve the desired outcome. Thus most early HTPs retained confidence in their role as resource, but presented the appearance of fitting the role desired for them by the worker. Once placement was effected, however, many early HTPs turned to organizational activities, mostly in ODS. Their early efforts in ODS had the result of increasing the breadth of the constituency, and increasing confidence of later adoptive families in directly functioning in the exchange on the basis of a resource role. The emphasis on publicity, recruitment and counseling meant that later potential adoptive parents

would be better informed about adoption and agency practice, and feel less need to fit the patient role when they felt they had another more important role as resource. Similarly the sheer number of families of this type recruited meant that what adoptive families were saying was an accurate theory of action.

Waiting Phase

From reports of both agencies and families there has been little change in the adoption process during the waiting phase. This is especially the case if the child to be placed is resident and a citizen of the United States. The waiting phase remains a time when the role of the worker is clear, technical, untrammelled. While families could press their prerogatives in phases of the adoption process directly relating to things about which they had knowledge, such as family functioning, their lack of knowledge about the technical means of actually bringing together a particular child with a particular family left them in a position of decreased confidence in role concept.

The manner in which agencies carry out the waiting phase underscores bureaucrat role confidence during this phase. Agencies typically would not reveal an approximate duration for the waiting phase, or when pressed over-estimated the time in order to retain maximum control. Similarly no families reported that they had been briefed on just what the agency would be doing during this phase. Though no explanation of this reticence to provide information was offered to those families who had an interest, most assumed that reasons of "confidentiality" prevailed. The acknowledgment by families of the right of privacy of

potential children provided sufficient basis for the claim of professional dominance during this phase. The tradition of professional confidentiality was the source of worker confidence, while families were uncertain about how they might have a more central role without violating confidences.

The only instances in which this was not the case occurred with families who adopted Korean or Vietnamese children. Families adopting Korean children typically worked with the Holt program, which systematically provides a monthly update on information about the child which the family will adopt. The various procedures, such as immigration, are made clear to the families. None expressed much anxiety or discomfort about the waiting phase, as each had been made aware from the outset the procedures and probable time. Thus both worker and client roles were confidently held, and congruent.

Families interviewed who adopted Vietnamese children were likely to have been directly involved in the process of finding their particular child, working through a voluntary group such as Friends of Children in Vietnam. In most cases they were more knowledgeable about the process than the worker at the agency which had completed the family study, and therefore reported uneasiness only about their own ability to carry out the required procedures. Interestingly families adopting overseas children often reported agency hesitancy about such such adoptions, especially if not completed through established international agencies. This point of view from the agency was more likely to be expressed when the family was proceeding independently, and was using

the agency because of the statutory requirement for a "home study" by an approved adoption agency. In this situation, of course, the agency's role as compared with the normal adoption process is quite unclear, a situation making for decreased bureaucrat confidence. The family, on the other hand, has a distinctly clear role in such adoptions, and is more confident about it. Thus it is not surprising to find agencies uncomfortable about present methods for Vietnamese adoption.

Placement

The placement phase presents interesting and unusual problems. Both families and agencies indicate difficulties with the manner in which this phase is now carried out, but few actual changes from traditional practice have occurred. That there is a mutual uneasiness represents the general impact of the changed client role on the overall system. The one main change as compared with traditional adoption is that the expansion of the family by adoption is no longer a hidden event, to be hushed over or made to appear as much like the "real thing" as possible. But this more public nature of adoption and the generalized use of parent groups as a resource is not unique to this phase, nor is there much evidence that the overall trend has had much impact on the way in which the placement phase is carried on.

One possible explanation is that most of the attention and effort at change has been focused on that part of the adoption process traditionally thought to be most important, namely the family study. Indeed from the reports of both families and agencies most of the re-examination and new definition of roles has been directed there. But to say that

attention has been focused elsewhere does not explain why it has not been focused on the placement phase. Some explanation may be found in the differing ways in which the placement phase is viewed from the perspective of the evaluative and educative approaches.

For the evaluative approach the worker reaches a conclusion regarding the acceptability of the family, and the best possible match of a child with that family. The conclusion itself, based on the worker's diagnosis of both family and child during the family study phase, is sufficient to satisfy the worker of the desirability of the placement. Because the worker is satisfied that the placement will work, no preparation or information is needed by family or child. The addition of a child to a family will by definition equal a new adoptive family. This is the predictive assumption of the evaluative approach. Therefore in an agency emphasizing the evaluative approach no specific work need be done with family or child. The public good imperatives are met in the predictive calculus. The provision of information to the family in any appreciable amount would only serve to provide technical data by which the worker's conclusion might be challenged, and role confidence shaken. Role confidence is kept high by withholding data. The worker retains control over the placement, as the family has no real basis on which to challenge. Failing this the family must accept the worker's designation of roles, and conclusion about placement, or be susceptible to suspicion in the public good dimension for refusing a placement which already has been determined to be in the best interests of the child. Thus the withholding of information by the worker serves to reinforce

worker role confidence in the exchange, and provide a basis for rendering the family less confident regarding its role. In this kind of situation the probability that any family will attempt to assert its own role concept to achieve a more acceptable balance in the exchange is slight, when compared with the primary concern of the family to have the child with them. This concern would be even more strongly felt after a waiting period of uncertainty and anxiety. At such a time a family has relatively minor interest in preparation or information about the child. The reality of the child itself is too compelling. Most families reported a willingness to accept the most minimal sort of information at placement as a trade-off for getting the child quickly. Subsequent attempts to get further information were most often rebuffed by the worker, claiming agency policy. This situation was true for agencies tending toward the evaluative approach, whether for early or later HTPs.

One might suspect that for agencies tending toward the educative approach there might be some substantial change in the placement phase. Though such agencies (and families who had placements through such agencies) expressed the need for changes in fact very few instances of change were reported. To a certain extent this relates to a basic premise of the educative approach, that the families have the primary role in the process, with the worker taking on a facilitator roles. This premise works very well in the phases of the process with which workers are most familiar, especially the family study phase. Here traditional concerns can be recast and developed around different assumptions in a manner which indeed would be educative for families. The language,

issues, and methods of the family study are all very familiar to the adoption worker; they are the worker's unique knowledge. Thus when prodded by families who viewed their role as resource and worker as educator, workers could alter, change, add, eliminate. However, much of the rest of the adoption process as traditionally carried on has involved very little in the way of special service or unique worker skill. Rather it has entailed administration of a management process, not dissimilar to what a real estate broker or lawyer does regarding property ownership transfers. Thus there is little in traditional knowledge which can be recast as educative for the placement phase. When the question would be raised by parents and parent groups, workers had little substantive information to impart. Many agencies which shifted to an educative approach were quick to concede the need for better preparation and information at this phase, but had no experience or training which enabled them to see the crucial issues. Persons have such knowledge such as child development specialists, who might have had at best limited involvement in adoption. There is little research which might guide workers. In turning to the families themselves on the premise of their primary role in adoption, workers found little help. Though families could describe what had happened during this phase, they had no special skills which enabled them to analyze what in particular might be needed at this phase. Thus even in situations in which resource role of the parent was respected there is no substantive change.

Thus the placement phase presents the interesting situation of decreased role confidence on the part of both parents and workers. In

this situation the traditional procedures tend to be maintained in the absence of any other compelling alternatives. Nevertheless there is common admission of the need for improved practices at placement.

Trial Period

Such changes have been undertaken are by agencies utilizing an educative approach. In most cases utility of certain changes initially advocated by parent groups, such as more extensive orientation sessions, provided a basis for a positive response to suggestions for changes in other phases of the adoption process. This willingness to consider new theories of action was also the case for the trial period phase. The major change reported was from supervision by an individual worker of an individual family to group supervision, in which involved families tend to "supervise" each other and the workers served to facilitate group dynamics and access to resources. In these kinds of situations both families and workers felt confident about their roles. The resource role of the family and the educator/facilitator for role in the worker are congruent. Thus a new bureaucratic stability is achieved because of the congruency in role conceptions in a situation which might have been unstable.

Much of the confidence for changing to group supervision derives from the demonstrated success of such efforts, usually carried on informally in the ODS area groups, and the small friendship networks of adoptive families. Using a family role as resource and with the demonstrated usefulness of such trial period activity on the informal ODS basis, agencies tending toward the educative theory of action were

able to develop worker confidence in this change in practice for this phase.

Agencies employing the evaluative approach, however, were much less likely to change prevailing practice. In common with their approach to the placement phase such agencies were likely to conclude that their initial evaluation of the suitability of the placement had already met public good criteria, and therefore were not likely to see any need for extensive activity during the trial period. Indeed to be involved in any extensive way would be to contradict basic elements of worker role and to undermine role confidence. In short worker involvement here provides only redundant information. Most agencies following this approach make perfunctory follow-up visits, to be certain no calamities have contradicted their prediction. Otherwise they let families know that they are available "in case of problems." However, families who have had placements with such agencies report that workers also communicate that they really don't want to hear about any problems. To learn of problems would only constitute a rebuke of professional judgment, and decrease role confidence. Thus agencies in these circumstances have limited contact with families. Since most families view themselves as resources, are confident in this role perception, have alternate sources for other resources (ODS, for example) and can satisfy the agency's prophecy best by remaining quiet and unseen, they tend not to press for major agency-related changes at this point.

Legalization

Because the legalization phase is a time when another exchange, that between the social work and legal professions, is dominant, little has been changed in the adoptive family/adoption worker exchange system. The conflict in the worker-court exchange has decades of history. It arises out of an attempt to change the basic procedures in adoption from those in statute to those of the social work profession. Social workers want their determinations to be primary basis for ruling on an adoption petition, while the courts have held that it is their prerogative to rule on whatever grounds they see fit and permissible under statute. Traditionally particular families and children involved in adoption petitions become forgotten parties to a legal transaction negotiated by others for them.

Agencies across the board, regardless of which approach emphasized, seem caught within the terms of this traditional conflict. For agencies and workers court appearances seem to be defined as matters between professionals. Even agencies which acknowledged that families often had concerns and significant emotional investment in the legalization seemed unable to suggest changes which might be more responsive to family's role concept. Neither families nor agencies have proposed any formal changes in practice during this phase. For families the reason may be similar to their hesitancies about the placement phase--the end is too close, the potential risk too great. And too, once the adoption is finalized, none of the issues seem so pressing. It would appear unlikely that agencies will initiate changes as long as they perceive of the

courts as a source of conflict. The long-term result of the battle over primacy in the adoption process has been a steady assumption of power by the social workers. From their point of view, this situation should continue, as it contributes to a basic bureaucratic stability.

Post-legalization

As was the case with the pre-contact phase, the post-legalization phase has not traditionally been regarded by agencies as part of the adoption process. Therefore such changes in the process have occurred relative to this phase come primarily from parents and parent groups. There are not many changes to point to. The most important is perhaps the acknowledgment that certain issues of long-term family functioning in families with adopted children are likely to be unique to the fact of the adoption, and therefore become an issue with which participants in the adoption system should concern themselves.

Few programmatic elements can be identified relative to agency practice, as there has been no traditional role against which to measure changes. Some agencies mentioned their availability to parents throughout the life-time of the family. Issues anticipated as likely reasons for a family recontacting the agency included the child's interest in details of the adoption, the need for differing explanations of adoption at different ages for the child, and physical or emotional problems for which the agency might be a resource referral source.

Parent groups have been more active, as the issues which emerge over time are more immediately evident to them. Since the post-legalization phase is not thought to be a domain of the agency and worker parents

are confident in creating their own roles. Thus the several North American conferences on adoptions held since 1968 have all been initiated and sponsored by parent groups. The Massachusetts ODS group has sponsored special series on issues of blackness, and prepared a major research and demonstration project proposal in the area.

APPENDIX A

COMPARISON
 1970 NATIONAL SAMPLE OF TRANS-RACIAL ADOPTIVE FAMILIES (N=564)
 AND
 1973 MASSACHUSETTS SAMPLE OF "HARD-TO-PLACE" ADOPTIVE FAMILIES (N=210)

Family Size

Number of Children

	0	1	2	3	4	5	6+
National	0	9.4	20.6	27.1	19.5	9.6	13.1
Mass.	0	10.0	17.5	25.0	27.5	12.5	7.5

Number HTP

National	0	71.8	20.6	5.3	2.0	0.0	0.4
Mass.	0	30.0	50.0	17.5	0.0	0.0	2.5

Number In-Race Adoptions (non HTP)

National	84.2	9.9	3.7	1.1	0.7	0.2	0.2
Mass.	85.0	7.5	7.5	0	0	0	0

Foster Children*

	Yes	No
National	16.8	92.8
Mass.	42.5	57.5

*for Mass. 10 of 17 FC in 1970 and Subsequent

Age of First HTP at Placement

	<u>National</u>	<u>Mass.</u>
0 - 1 month	12.1	10.0
1 - 3 months	16.7	15.0
3 - 6 months	17.6	20.0
6 -12 months	18.3	20.0
1 - 2 years	14.0	10.0
2 - 3 years	7.4	7.5
3 - 5 years	6.2	5.0
5 -10 years	6.7	7.5
10+ years	1.2	5.0

Religious Affiliation

	<u>Male</u>		<u>Female</u>	
	<u>National</u>	<u>Mass.</u>	<u>National</u>	<u>Mass.</u>
Protestant	56.7	35.0	58.9	45.0
Catholic	13.8	27.5	15.8	30.0
Jewish	3.4	7.5	3.2	2.5
Other*	9.0	0.0	9.9	0.0
None	16.3	30.0	11.9	22.5

*Primarily Canadian.

Income

	<u>National</u>	<u>Mass.</u>
0 - \$ 7,499	8.3	7.0
\$ 7,500 - \$ 9,999	14.7	7.5
\$10,000 - \$12,499	26.6	10.0
\$12,500 - \$17,499	28.0	27.5
\$17,500 and up	22.0	52.5

Education

	<u>Male</u>		<u>Female</u>	
	<u>National</u>	<u>Mass.</u>	<u>National</u>	<u>Mass.</u>
High School	14.8	12.5	24.7	15.0
Some College	14.7	7.5	26.8	25.0
College Graduate	15.6	20.0	25.7	35.0
Some Graduate School	8.2	2.5	9.6	5.0
Masters	20.4	15.0	6.9	15.0
Professional Degree	12.8	15.0	5.3	5.0
Ph.D.	11.5	27.5	1.1	0.0

Sex, First Adopted Child

	<u>Male</u>	<u>Female</u>
National	46.1	53.2
Mass.	52.5	47.5

Which Type Adoption First

	<u>HTP</u>	<u>IRA</u>	<u>NA</u>
National	4.3	13.8	81.9
Mass.	0.0	12.5	87.5

Adoptive or Bio First*

	<u>A</u>	<u>B</u>	<u>NA</u>
National	3.7	70.7	25.5
Mass.	10.0	52.5	37.5

*Sample bias.

Political Affiliation

	<u>Male</u>		<u>Female</u>	
	<u>National</u>	<u>Mass.</u>	<u>National</u>	<u>Mass.</u>
Republican	22.7	2.5	20.9	5.0
Democrat	31.0	47.5	32.4	35.0
Independent	34.0	45.0	36.3	55.0
Other	9.6*	5.0	8.5*	5.0

*Primarily Canadian.

Age at Interview

	<u>Male</u>		<u>Female</u>	
	<u>National</u>	<u>Mass.</u>	<u>National</u>	<u>Mass.</u>
Less Than 25	1.2	0.0	2.5	0.0
25 - 29	16.0	22.5	27.8	35.0
30 - 34	31.9	40.0	33.2	40.0
35 - 39	23.2	20.0	17.0	17.5
40 - 44	14.9	10.0	11.9	2.5
45 - 49	8.2	5.0	5.1	2.5
50 - 54	2.1	2.5	2.1	2.5
55+	1.9	0.0	0.4	0.0

Male Age at First HTP

	<u>1970 National Sample</u>	<u>Early HTP</u>	<u>Later HTP</u>	<u>Total HTP</u>
Less than 30	24.4	45.0	60.0	52.5
30-34	32.3	30.0	25.0	27.5
35-39	23.4	25.0	5.0	15.0
40 and over	20.8	-	60.0	5.0

APPENDIX B - VALUE SURVEY COMPARISONS

Instrumental Value Medians and Composite Rank-Orders for Matched Samples of HTP and NORC Males (N=444)

<u>Value</u>	<u>HTP Group</u> N=222		<u>NORC Group</u> N=222		<u>Median Test</u>	
	Median	Rank	Median	Rank	Chi Square	P=
Ambitious (hard working, aspiring)	9.79	10	4.45	2	39.250	0.000
Broadminded (open-minded)	6.89	4	7.55	4	0.225	0.635
Capable (competent, effective)	9.57	8	8.35	6	6.659	0.010
Cheerful (lighthearted, joyful)	10.79	12	11.21	13	1.309	0.253
Clean (neat, tidy)	13.47	16	12.08	16	3.279	0.070
Courageous (standing up for your beliefs)	8.53	7	8.73	7	0.228	0.633
Forgiving (willing to pardon others)	7.28	5	10.07	10	21.023	0.000
Helpful (working for the welfare of others)	7.48	6	10.08	11	15.205	0.000
Honest (sincere, truthful)	3.22	1	2.92	1	0.227	0.633
Imaginative (daring, creative)	14.27	17	13.92	17	0.144	0.704
Indepndent (self-reliant, self-sufficient)	10.31	11	9.64	9	0.733	0.392
Intellectual (intelligent, reflective)	12.88	14	11.72	15	3.976	0.046
Loving (affectionate, tender)	4.93	2	9.30	8	42.110	0.000



Room 14-0551
77 Massachusetts Avenue
Cambridge, MA 02139
Ph: 617.253.2800
Email: docs@mit.edu
<http://libraries.mit.edu/docs>

DISCLAIMER

MISSING PAGE(S)

(Pg. 250)

APPENDIX B - VALUE SURVEY COMPARISONS (continued)

Terminal Value Medians and Composite Rank-Orders for Matched Samples of HTP and NORC Males (N=444)

<u>Value</u>	<u>HTP Group</u> N=222		<u>NORC Group</u> (N=222)		<u>Median Test</u>	
	Median	Rank	Median	Rank	Chi Square	P=
A comfortable life (a prosperous life)	14.28	15	10.91	13	28.743	0.000
An exciting life (a stimulating, active life)	12.79	13	14.50	16	5.709	0.017
A sense of accomplishment (lasting contribution)	7.73	8	8.25	6	0.326	0.568
A world at peace (free of war and conflict)	8.47	10	3.76	2	33.621	0.000
A world of beauty (beauty of nature and the arts)	12.84	14	13.13	15	0.082	0.775
Equality (brotherhood, equal opportunity for all)	6.63	4	9.50	8	15.144	0.000
Family security (taking care of loved ones)	3.59	1	3.50	1	3.426	0.064
Freedom (independence, free choice)	6.84	5	5.40	3	6.100	0.013
Happiness (contentedness)	8.16	9	7.85	5	0.227	0.634

Inner harmony (freedom from inner conflict)	7.70	7	10.43	12	16.768	0.000
Mature love (sexual and spiritual intimacy)	6.11	2	9.63	10	29.855	0.000
National security (protection from attack)	14.79	17	9.86	11	39.475	0.000
Pleasure (an enjoyable, leisurely life)	14.67	16	14.58	17	0.009	0.840
Salvation (saved, eternal life)	10.50	12	11.36	14	0.036	0.849
Self respect (self-esteem)	6.56	3	7.35	4	1.097	0.295
Social recognition (respect, admiration)	15.35	18	15.50	18	0.081	0.776
True friendship (close companionship)	8.82	11	9.58	9	1.092	0.296
Wisdom (a mature understanding of life)	6.84	6	8.28	7	4.447	0.035

APPENDIX B - VALUE SURVEY COMPARISONS (continued)

Instrumental Value Medians and Composite Rank-Orders for Matched Samples of HTP and NORC Females (N=486)

<u>Value</u>	<u>HTP Group</u> (N=243)		<u>NORC Group</u> (N=243)		<u>Median Test</u>	
	Median	Rank	Median	Rank	Chi Square	P=
Ambitious (hard-working, aspiring)	12.34	12	8.45	8	14.582	0.000
Broadminded (open-minded)	6.59	5	7.53	5	1.859	0.173
Capable (competent, effective)	10.76	10	10.00	11	1.852	0.173
Cheerful (light-hearted, joyful)	9.53	8	10.35	12	2.693	0.101
Clean (neat, tidy)	13.81	16	11.53	14	6.030	0.014
Courageous (standing up for your beliefs)	7.12	7	8.37	7	5.662	0.017
Forgiving (willing to pardon others)	5.41	3	6.36	4	2.400	0.121
Helpful (working for the welfare of others)	6.88	6	8.29	6	5.689	0.017
Honest (sincere, truthful)	3.0	2	2.71	1	0.411	0.522
Imaginative (daring, creative)	13.96	17	15.52	18	6.075	0.014
Independent (self-reliant, self-sufficient)	10.25	9	10.00	10	0.074	0.784
Intellectual	12.53	14	12.10	15	0.206	0.650
Logical (consistent, rational)	13.02	14	12.82	16	0.002	0.967

Loving (affectionate, tender)	2.226	1	6.00	3	51.367	0.000
Obedient (dutiful, respectful)	15.35	18	14.77	17	1.001	0.317
Polite (courteous, well-mannered)	13.47	15	11.44	13	8.596	0.003
Responsible (dependable, reliable)	5.80	4	5.91	2	0.008	0.927
Self-controlled (restrained, self-disciplined)	11.59	11	9.53	9	4.356	0.037

APPENDIX B - VALUE SURVEY COMPARISONS (continued)

Terminal Value Medians and Composite Rank-Orders for Matched Samples of HTP and NORC Females (N=486)

<u>Value</u>	<u>HTP Group</u> (N=243)		<u>NORC Group</u> (N=243)		<u>Median Test</u>	
	Median	Rank	Median	Rank	Chi Square	P=
A comfortable life (a prosperous life)	15.25	17	13.34	15	15.461	0.000
An exciting life (a stimulating, active life)	13.67	14	15.62	17	25.952	0.000
A sense of accomplishment (lasting contribution)	8.16	10	9.21	10	2.423	0.120
A world at peace (free of war and conflict)	7.52	8	2.52	1	51.916	0.000
Equality (brotherhood, equal opportunity for all)	6.10	3	6.18	4	0.132	0.716
Family security (taking care of loved ones)	4.00	1	4.34	2	0.207	0.649
Freedom (independence, free choice)	8.04	9	5.24	3	23.129	0.000
Happiness (contentedness)	7.52	7	8.33	8	3.336	0.068
Inner harmony (freedom from inner conflict)	6.18	4	8.89	9	19.298	0.000
Mature love (sexual and spiritual intimacy)	5.84	2	10.86	13	63.327	0.000
National security (protection from attack)	14.82	15	9.33	11	81.675	0.000
Pleasure (an enjoyable, leisurely life)	15.20	16	15.42	16	0.827	0.363
Salvation (saved, eternal life)	11.58	12	8.33	7	4.371	0.037

Self respect (self-esteem)	6.53	5	7.39	5	1.400	0.237
Social recognition (respect, admiration)	15.82	18	16.00	18	1.918	0.166
True friendship (close companionship)	9.09	11	10.58	12	10.880	0.001
Wisdom (a mature understanding of life)	6.62	6	7.47	6	2.393	0.222

Introduction - Footnotes

1. See, for example, Martin Rein, "Social Work in Search of a Radical Profession," in Social Policy: Issues of Choice and Change, New York: Random House, 1970, pp. 281-301; and Herman Boernzweig, "Social Work and Psychoanalytic Theory: A Historical Analysis", SOCIAL WORK, January, 1971, pp. 7-16.
2. For a general review of the child welfare field see Hazel Frederickson and R. A. Mulligan, The Child and His Welfare, San Francisco: W. H. Freeman and Co., 1972 (3rd edition); or Lela Costin, Child Welfare: Policies and Practices, New York: McGraw-Hill, 1972.
3. Joseph Morgenstern, "The New Face of Adoption," Newsweek, September 13, 1971, pp. 66 and ff.
4. Harriet Fricke, "Interracial Adoption: The Little Revolution," SOCIAL WORK, July, 1965, pp. 92-97.
5. Marvin B. Sussman, "Family Systems in the 1970's: Analysis, Policies and Programs," THE ANNALS, July, 1971, p. 42.
6. For a specific discussion of trans-racial adoption see Thomas E. Nutt and John A. Snyder, TRANS-RACIAL ADOPTION, Cambridge, Mass.: MIT Department of Urban Studies and Planning, February, 1973; or David C. Anderson, CHILDREN OF SPECIAL VALUE: INTERRACIAL ADOPTION IN AMERICA, New York: St. Martin's Press, 1972.

Chapter 1 - Footnotes

1. For a more detailed history of adoption law see Morton J. Leavey, LAW OF ADOPTION Dobbs Ferry, NY: Oceana Publications, 1968, (3rd edition); and Fredericksen and Mulligan, op.cit.
2. As an example see the discussion of adoption law in Massachusetts in John F. Lombard, MASSACHUSETTS PRACTICE (COL. 3): ADOPTION, ILLEGITIMACY AND BLOOD TESTS, Boston: Boston Law Book Co., 1952, with up-dates.
3. Ursula M. Gallagher, "Adoption Resources for Black Children," CHILDREN, March-April, 1971, p. 49.
4. Under this definition the precise categories defined as "hard-to-place" change according to supply and demand factors. Thus within the past two or three years, in some parts of the county, any healthy infant, regardless of race, is "easy-to-place", with most any healthy toddler, regardless of race, also relatively easy to place. However, for consistently in reference and comparability of sample for this study the phrase "hard-to-place" will be used to describe any child other than a healthy, white baby.
5. The primary source on bureaucracy is Max Weber. See Weber, Essays in Sociology, trans. H.H. Gerth and C. Wright Mills, NY: Oxford University Press, 1946, and Max Weber, The Theory of Social and Economic Organization, trans. A.M. Henderson and Talcott Parsons, NY: Oxford University Press. Excellent in this discussions of Weber are found in Nicos P. Mouzelis, ORGANIZATION AND BUREAUCRACY: AN ANALYSIS OF MODERN THEORIES, Chicago: Aldine, 1968, and Peter Blau, THE DYNAMICS OF BUREAUCRACY, Chicago: University of Chicago Press, 1963 (revised edition). It is also important to note explicitly that the term "bureaucracy" is used here referring to a certain type of administrative organization and without the negative connotations it has colloquially assumed.
6. A summary of main characteristics of the traditional form of bureaucracy is presented by Mouzelis, op.cit., p. 39. A similar summary is found in Blau, op.cit., pp. 2-3.
7. Here see Mouzelis, op.cit., pp. 15 ff.
8. "For all these reasons, organizational members do not comply automatically with formal rules. Their compliance is always problematic and unpredictable. It is this fundamental 'recalcitrance of human tools' which accounts for the unanticipated consequences of purposive action and control." Mouzelis, op.cit., p. 60.

9. Sarason notes: "In the short run specialization appears to have productive consequences in terms of new knowledge and practice, but in the long run it seems to render the individual, or field, or agency increasingly unable to assimilate and adapt to changes in surrounding social events and processes. Worse yet, the forces (individual and social) which generate specialisation unwittingly increase the extent of ignorance of the larger social picture so that assimilation and adaptation are not even perceived as problems." Seymour B. Sarason, *THE CREATION OF SETTINGS AND THE FUTURE SOCIETIES*, San Francisco: Jossey-Bass, Inc., 1972, p. 121.
10. In certain respects this discussion has roots in Amitai Etzioni, *A COMPARATIVE ANALYSIS OF COMPLEX ORGANIZATIONS: ON POWER, INVOLVEMENT AND THEIR CORRELATES*, NY: The Free Press, 1961.
11. Etzioni's work focusses on internal issues of compliance.
12. In defining my thinking on this I am particularly indebted to a paper by Michael Lipsky, "Towards a Theory of Street-Level Bureaucracy," MIT, mimeo, 51 pp., nd.
13. Etzioni deals with goal compliance problems internal to organizations. See Etzioni, op.cit., Ch. 4.
14. Barber identifies four essential attributes of professional behavior: "a high degree of generalized and systematic knowledge; primary orientation to the community interest rather than to individual self-interest; a high degree of self-control of behavior through codes of ethics internalized in the process of work socialization and through voluntary association organized and operated by the work specialists themselves; and a system of rewards (monetary and honorary) that is primarily a set of symbols of work achievement and thus ends in themselves, not means to some end of individual self-interest." Bernard Barber, "The Sociology of Professions," *DAEDALUS*, Fall 1963, p. 672.
15. Donald A. Schon, *BEYOND THE STABLE STATE*, NY: W.W. Norton and Co., 1971.
16. Ibid, p. 48.
17. "In times of values polarization, we may suggest that the zone (of indifference) becomes wider, but that indifference and, as a result, discretion, is diminished as bureaucratic performance is increasingly scrutinized and practices formerly ignored assumed new meaning for aroused publics." Lipsky, op.cit. p. 12.

18. This data was collected as part of a study "Characteristics of Trans-Racial Adoptive Parents" support under NIMH grant # R03 MH 19085-01. The study was jointly carried out with John A. Snyder of Michigan State University, and is reported in the monograph TRANS-RACIAL ADOPTION, Cambridge, Mass.: MIT Dept. of Urban Studies and Planning, February, 1973. The initial impetus for the study came from the Open Door Society of Massachusetts (then Families for Inter-Racial Adoption) which sponsored the 2nd International Conference on Trans-Racial Adoptions held in Boston in November, 1970. The proceedings for that conference contain the preliminary report, Thomas E. Nutt and John A. Snyder, "A Profile of Trans-Racial Adoptive Parents," CHILDREN WHO WAIT, Boston: Open Door Society, November 13-15, 1970, pp. 36-46. My appreciation to both John Snyder and ODS.
19. Rokeach's work has proceeded on the assumption that men do not differ from one another so much in whether or not they possess this or that value, but rather in how they pattern them and rank them in order of their importance with respect to one another. He distinguishes two sorts of values, terminal (preferred end-states of existence) and instrumental (preferred modes of behavior). He has estimated that man has only about a dozen-and-a-half terminal values and about five or six dozen instrumental values. The Rokeach Value Survey consists of two sets of 18 terminal and 18 instrumental values, each set of arranged in alphabetical order. The respondent's task is to number each set of 18 values in order for importance as "guiding principles in your daily life." Previous research has shown that respondents rank order the two sets of values in a reasonably reliable manner. With time intervals ranging between seven weeks and three months, test-retest reliability of the terminal and instrumental values ranges on the average of between 0.72 and 0.80. Distinctive value patterns have been found for a variety of tested groups. See Milton Rokeach, "The Measurement of Values and Value Systems" in G. Abcarian (ed.), POLITICAL PARTICIPATION AND SOCIAL-PSYCHOLOGICAL PROCESSES, Columbus, Ohio: Charles E. Merrill Books, Inc., 1970.
20. Perhaps 500 questionnaires did not go beyond the bulk mail stage, and never were received by TRA families. Thus the return rate is probably somewhat higher.
21. See Laurence L. Falk, "A Comparative Study of Trans-racial and In-racial Adoptions." CHILD WELFARE, FEBRUARY 1970, pp. 82-88 and Gerald C. St. Denis, INTERRACIAL ADOPTIONS IN MINNESOTA, unpublished PhD dissertation, University of Minnesota, June, 1969.

22. Barney G. Glaser and Anselm Strauss, THE DISCOVERY OF GROUNDED THEORY: Strategies for Qualitative Research, Chicago: Aldine Publishing Co., 1967.

Chapter 2 - Footnotes

1. The reader who wishes to do so can begin with the various citations in the chapter, which have been selected as most illustrative of the various changes and emphases. Summary works for this purpose include: I. Evelyn Smith (ed.), READINGS IN ADOPTION, New York: Philosophical Library, 1963; M. L. Kellmer Pringle, ADOPTION: FACTS AND FALLACIES, New York: Humanities Press, 1966; Bernice Q. Madison, "Adoption: Yesterday, Today and Tomorrow," CHILD WELFARE, May 1966, pp. 253 ff. and June 1960, pp. 341-348; and Zitha R. Turitz, "A New Look at Adoption: Current Developments in the Philosophy and Practice of Adoption," TEACHING MATERIALS ON THE WELFARE OF CHILDREN, New York: Council of Social Work Education, 1969, pp. 66-72.
2. For an excellent summary of the debate see C. D. Randall (ed.) HISTORY OF CHILD SAVING IN THE UNITED STATES, report of the Twentieth National Conference of Charities and Corrections, Chicago, June 1893.
3. Agnes K. Hanna, "Some Problems in Adoption," THE CHILD, Vol. 1, No. 6 (1936), p. 6.
4. See Witmer et al, Independent Adoptions, New York: Russell Sage, 1962, p. 34.
5. Hanna, op. cit.
6. Emelyn Foster Peck, ADOPTIONS LAWS IN THE UNITED STATES, U.S. Department of Labor, Children's Bureau, Publication No. 148, Washington, D. C.: GRP, 1925, p. 4.
7. Michael Shapiro, A STUDY OF ADOPTION PRACTICE, VOLUME I: ADOPTION AGENCIES AND THE CHILDREN THEY SERVE, New York: CWLA, 1956, p. 19.
8. There was a rise in adoption petitions from 16,000 in 1934 to 50,000 in 1944. "Agencies providing adoption service were enfeebled by poor public relations, as well as specific accusations about their reluctance to break with unrealistic requirements and cumbersome methods....The sudden, sharp rise in the number of independent adoptions indicated doubt about the value of service offered by licensed agencies." Madison, op. cit., p. 254.
9. See, for example, William D. Schmidt, "The Community and the Adoption Problem," in Smith, op. cit., pp. 38-48.

10. Shapiro, op. cit., p. 20.
11. Shapiro's study shows that in 1948 80% of the private agencies were looking for the "perfect child with perfect background" for placement. In 1951 this proportion had dropped to 60%, while in 1954 almost 90% did not exclude previously "handicapping conditions." Ibid., p. 55.
12. Turitz, op. cit. Messenger concludes that more than ever agencies "became child-centered, now seeking the "perfect" home, and viewing applicants as utilizers of a benefit, not as clients of the agency." See Katherine P. Messenger, "The Selection of Parents by Adoption Agencies: A Study in Conflicting Goals and Values," mimeo, January, 1971, p. 10.
13. Smith, op. cit., p. 259.
14. Matching is not so much looking for similarities in physical characteristics and backgrounds per se as it is process through which there is a focus on the identification of the needs of individual children and a corresponding study, selection of, and giving of help to families with the capacities to respond to those needs." Madison, op. cit., p. 258.
15. Rita Dukette, "Some Casework Implications in Adoptive Home Intake Procedures" (1954) in Smith, op. cit., p. 271.
16. Speaking in a 1951 CWLA Adoption Workshop Callman Rawley created a furor "by challenging one of our basic concepts, namely that of matching adoptive parents and children...asking if this need for likeness is really a need of the family and the child or the need of the adoption worker....the tremendous amount of hostility that was aroused was indicative of our fear of even considering that perhaps there are children and families who can accept a great deal in the way of difference." Ruth Taft, "Adoptive Families for 'Unadoptable' Children," in Smith, op. cit., p. 237.
17. Beatrice Pruski, "When A Couple Plans to Adopt a Baby," THE CHILD, April 1953, p. 127. The article also appears in Smith, op. cit., pp. 285-292.
18. Sarabelle McCleery, "A Plan for Improved Service to the Adoptive Applicant," in Smith, op. cit., p. 283.
19. Dr. Viola Bernard, quoted in Florence G. Brown, "Supervision of the Child in the Adoptive Home," in Smith, op. cit. p. 335. This is a 1955 article.
20. Tafts, op. cit.

21. Neville B. Weeks, "Adoption for School-Age Children in Institutions, in Smith, op. cit., pp. 245-256.
22. Anne Leatherman, "Placing the Older Child in Adoption," in Smith, op. cit., pp. 220-230.
23. Phyllis Dunne, "Placing Children of Minority Groups for Adoption," CHILDREN, March-April 1958, pp. 43-48.
24. Voskine Yanekian, "Inter-Country Adoptions," CHILD WELFARE, October 1958, pp. 25-29.
25. R. Dukette and T. Thompson, ADOPTIVE RESOURCES FOR NEGRO CHILDREN, New York: CWLA, 1959.
26. Arnold Lyslo, "Adoptive Placement of American Indian Children with Non-Indian Families," in Smith, op. cit., pp. 231-236.
27. Alice Hornecker, "Adoption Opportunities for the Handicapped," CHILDREN, July-August 1962, pp. 149-152.
28. Dunne, op. cit., p. 47.
29. David Fanshel, "Approaches to Measuring Adjustment in Adoptive Parents," in Quantitative Approaches to Parent Selection, New York: CWLA, 1962, pp. 24-25.
30. H. David Kirk, SHARED FATE: A THEORY OF ADOPTION AND MENTAL HEALTH, New York: The Free Press of Glencoe, 1964.
31. Madison, op. cit., p. 258.
32. Ibid.
33. Ibid.
34. Turitz, op. cit., p. 2.
35. Ibid.
36. Jane Rowe, PARENTS, CHILDREN AND ADOPTION: A HANDBOOK FOR ADOPTION WORKERS, London: Routledge and Kegan Paul, 1966.
37. Clayton Hagen, "The Premise of Adoption," mimeo, 7 pp. nd. (ca. 1964); "An Approach to Adoption," mimeo, 16 pp., May 11, 1964; "Basic Values in Adoption," paper presented to the Adoptive Parents Committee of New York, May 1, 1965, 14 pp.

38. "If we consider persons interested in adoption as those who will be parents, and our function as primarily that of helping them to be good parents, we will consider how it is for them. We must start where they are. All adoptive parents do not come ready made, and it is not simply a question of separating those who are adequate from those who are not. Some applicants may be very ready, having talked to their friends who have adopted and their study need not be as long or as involved. However, other applicants may have much uncertainty about being adoptive parents. Some may need to discuss their feelings at length, some may need only to be educated as to what is involved in adoption. Probably most families with whom we place children could benefit from this." Hagen, "Approach", p. 6.
39. See Pruski, op. cit. for a description of this use of group meetings.
40. Hagen, "Basic Values," p. 1.
41. Ibid., p. 2.
42. "It is our experience that prospective parents have thought very much about the responsibility of raising a child, and this is one of the concerns that they want to talk to someone about." Ibid., p. 4.
43. "Perhaps it is as important for biological parents to remember the autonomy of their children as it is for adoptive parents to remember that their children are adopted." Ibid., p. 8.
44. Mildred Hawkins, "The New Look in Adoptions," Catholic Charities Review, December, 1969, pp. 4-9.
45. Raymond Mondloh, "Changing Practice in the Adoptive Home Study," CHILD WELFARE, March 1969, pp. 148-156.
46. "We were established to find a family for a homeless child, but we believe both the child and the family have a need for and a rightful claim to our service."
47. Barbara P. Griffin and Marvin S. Arffa, "Recruiting Adoptive Homes for Minority Children--One Approach," CHILD WELFARE, February 1970, pp. 105-107.
48. Ursula M. Gallagher, "Adoption Resources for Black Children," CHILDREN, March-April 1971, pp. 49-53; and Elizabeth Herzog et al, FAMILIES FOR BLACK CHILDREN: THE SEARCH FOR ADOPTIVE PARENTS, Washington, D.C.: Office of Child Development, 1971--Volume 1, an experience survey and Volume 2 Programs and Projects (1972); Jacqueline Neilson, "Placing Older Children in Adoptive

- Homes," CHILDREN TODAY, November-December 1972, pp. 7-13.
49. Cornelius M. Hegarty, "The Family Resource Program: One Coin, Two Sides of Adoption and Foster Family Care," CHILD WELFARE, February 1973, pp. 91-99.
 50. Kenneth W. Watson, "Subsidized Adoption: A Crucial Investment," CHILD WELFARE, April 1972, pp. 220-230.
 51. Mary M. O'Neill, "Adoption: Identification and Service," CHILD WELFARE, May 1972, pp. 314-317.
 52. Vernon R. Wiehe, "The Group Adoptive Study," CHILD WELFARE, December 1972, pp. 645-649.
 53. Charlotte J. Bytner, Lucy S. Griffin, Wesley W. Jenkins and Eleanor O. Ray, "A Positive Approach in Evaluating Potential Adoptive Families and Children," CHILD WELFARE, June, 1972, pp. 385-390.
 54. Helen Commos, "Minimizing the Risks of Adoption through Knowledge," SOCIAL WORK, January 1971, pp. 73-79.
 55. Five premises that should underlie adoption were developed:
 1. Within our society the family is the best-known milieu for rearing children--hopefully the family into which a child is born, but if that cannot be, then a substitute one that provides permanence and security, preferably through legal adoption.
 2. It is the adoption agencies' responsibility to find adequate adoptive homes for all children who need them.
 3. An adoption agency best fulfills this responsibility by providing a service that facilitates bringing together children who need homes and families interested in adoption.
 4. Most families that come to an agency for adoption do not have serious pathological problems and have at least an average capacity to become adoptive parents.
 5. Given accurate and adequate information, most people are better able to make their own important life decisions than to have others make them.

The new adoption service was developed on the basis of these concepts. It focused on serving children currently needing homes

and stressed applicants' ability to make decisions."

Joan Shireman and Kenneth W. Watson, "Adoption of Real Children," SOCIAL WORK, July 1972, p. 30.

56. Council on Adoptable Children, FRONTIERS IN ADOPTION: A report of a conference and its impact, Ann-Arbor, Michigan, October, 1967; Open Door Society of Montreal, MIXED RACE ADOPTIONS, Proceedings of the 1st International Conference on Mixed Race Adoptions, Montreal, May 30-June 1, 1969; Open Door Society of Massachusetts, CHILDREN WHO WAIT, Proceedings of the 2nd International Conference on Trans-racial Adoption, Boston, November 13-15, 1970; Lutheran Family and Children's Service, PROCEEDINGS, INSTITUTE ON BLACK CULTURE FOR ADOPTIVE COUPLES, St. Louis, November 13-14, 1971; Open Door Society of Missouri, TASK FORCE REPORTS, 3rd North American Conference on Adoptable Children, St. Louis, April 21-23, 1972.
57. Alan R. Gruber, FOSTER HOME CARE IN MASSACHUSETTS: A STUDY OF FOSTER CHILDREN, THEIR BIOLOGICAL AND FOSTER PARENTS, Boston: Governor's Commission on Adoption and Foster Care, 1973.

Chapter 3 - Footnotes

1. Andrew Billingsley, "Bureaucratic and Professional Orientation Patterns in Social Casework," SOCIAL SERVICE REVIEW, December, 1964, p. 406.
2. Mrs. Muriel B. McCrea, "Child and Parent: Matching Need to Potential" in FRONTIERS IN ADOPTION, Ann Arbor; COAC, 1969, pp. 19-28.
3. Ibid, p. 21.
4. "We had been mathcing with the arrogance that was beyond a Godhead, Thinking we could take a baby and know what it was going to turn out to be twenty years later." Ibid, p. 23.
5. "We presume when the couple comes in that they're perfectly healthy, normal people and there's nothing pathological about their desire to adopt. Instead of worrying about what applicants might have wrong with them and trying to find out what it is, we say, 'This is the kind of child we have, and he's going to make demands on you this way--and this way--and this way, and where do you think you'll stand when this is demanded of you?' Ibid, p. 27.
6. "It was just sort of a conclusion that we were not going to get homes for the children anyway, so why bother to get the consent. When a Negro mother came to ask for adoption care for her child or for placement for her child, she was told we could provide boarding care, but that no adoption would be possible." Ibid, p. 22.
7. Ibid, p. 24.
8. Ibid.
9. See Isaac, op. cit.
10. Frontiers, op. cit. p. 121.
11. Ibid.
12. Ibid, p. 122. The introduction to the proceedings of the conference aptly sums up the change role of the parent groups: "Through research and the experiences of its members, the group became convinced that present adoption services were inadequate in finding sufficient numbers of homes. COAC members felt that there must be a way to encourage and challenge adoption professionals to evaluate their current programs realistically and revise them to fit the needs of our age."

13. See Task Force Report #1: "Organization, Function and Community Relationships of Citizen Adoption Groups: Building an Invincible Network," in PROCEEDINGS, 3rd North American Conference on Adoptable Children, op. cit. pp. 1-2.
14. The following is based on the author's personal involvement in ODS since 1968, including service on the Board; and on Griffin and Arffa, op. cit. The latter describes the early years of ODS, when the organization was known as Families for Inter-racial Adoption.
15. Griffin and Arffa, p. 107.
16. Examples include a single-evening lecture, a ten-week course in black history at Simmons College, an afternoon session on hair care, and a major proposal jointly developed with Circle Associates, a Roxbury consulting firm, for a year-long training program in "Black Culture for Trans-Racial Adoptive Families." The latter, though not funded, did provide many ODS parents with an entre to many of Circle's resources, including its Afro-American Studies Resource Center. Several ODS parents have utilized this personally, as well as successfully urging the school systems in their communities to utilize these resources.
17. For a discussion of ODS activity here, see Judy Meredith, Ann Smith and Elton Kilbanoff, "Legislative Action and Adoption Policy," in CHILDREN WHO WAIT, op. cit. pp. 108-118.
18. See for example Gruber, op. cit.
19. The others were: Montreal, 1969; St. Louis, 1972; and, in planning, Washington, DC, 1974.
20. Judy Meredith, NOW WE ARE A FAMILY, Boston: Beacon Press, 1972; Elton and Susan Kilbanoff, ADOPTIONS, Boston: Little, Brown, in press.
21. Hegarty, op. cit., p. 97.
22. The network of people interested in adoption of Vietnamese children did so, with Friends of Children in Vietnam recently licensed in Denver, Colorado. COAC in Michigan and New Jersey each formed a 'Spaulding for Children' agency. See Julie Grey, "Private Initiative in Developing Adoption Resources," in CHILDREN WHO WAIT, op. cit., pp. 92-99. Another form of agency is proposed by an ODS member who is also a former adoptions worker in Deborah McCurcy, "Serving More of the Children Who Wait Through Home-Based Adoption Agencies," in CHILDREN WHO WAIT, op. cit., 100-107.

Chapter 4 - Footnotes

- 1,2. Throughout this discussion the primary reference will be the 1970 data on trans-racial adoptive families. A comparison of that data with comparable information on the sample of 40 Massachusetts families who had adopted "hard-to-place" children shows that in essential respects the characteristics are interchangeable. A brief summary showing this comparison is found in Appendix A. The differences are attributed to the peculiarities of the Boston area and allowances for the time difference. Comparison with New England regional data from the 1970 survey narrowed the differences even more. Primary among the differences of the 1970 and 1973 aggregate data are: education, with the higher achievement in the Massachusetts data attributable to the job requirements of electronics and academic employment plus the normal increase in educational attainment over a 3 year period; income, with the Boston cost-of-living and inflation accounting for the higher average; age, with the generally lower profile a continuation of a trend noted in the 1970 data; politics, with the more "left" orientation of the Massachusetts data reflective of the political situation in the state; and religion, with the higher Catholic, lower Protestant response a function of Catholic Boston. Since the differences are readily explained and are in extent and not kind, and since most "hard-to-place" adoptions in 1970 and before were trans-racial adoptions, it is my conclusion that the use of the 1970 TRA data as proxy for the characteristics of all families who adopt "hard-to-place" children is valid. Throughout where relationships are noted evidence may be found in Nutt and Snyder, op. cit., where otherwise specified.
3. The exception comes in a study of families who adopted "hard-to-place" children prior to the watershed years. In this 1962 study it was found that the applicant who accepted a "hard-to-place" child was likely to be the applicant with marginal eligibility as an adoptive parent. See Alfred Kadushin, "A Study of Adoptive Parents of Hard-to-Place Children," SOCIAL CASEWORKER, May, 1962, pp. 227-233.
4. This picture is confirmed in reported research, beginning with Ehtel Roskies, AN EXPLORATORY STUDY OF THE CHARACTERISTICS OF ADOPTIVE PARENTS OF MISED RACE CHILDREN IN THE MONTREAL AREA, unpublished MA Thesis, University of Montreal, 1963; Joanne Lebo, Diane Rogers and Constance Studtmann, ADOPTIVE PLACEMENT OF THE NEGRO-CAUCASIAN CHILDREN, unpublished Master's Thesis, University of Minnesota, 1965, Gerald C. St. Denis, INTERRACIAL ADOPTIONS IN MINNESOTA, unpublished PhD dissertation, University of Minnesota, June, 1969; Laurence L. Falk, "A comparative Study of Transracial and Inracial Adoptions," CHILD WELFARE, February 1970, pp. 82-88; and Charles H. Zastrow, OUTCOME OF NEGRO

CHILDREN--CAUCASIAN PARENTS TRANSRACIAL ADOPTIONS, unpublished PhD dissertation, University of Wisconsin, June 1971. One other study, Drew Priddy and Doris Kagin, "Characteristics of White Couples Who Adopt Black/White Children," SOCIAL WORK, July 1971, pp. 105-107, confirms the SES ranking, but finds that 58% of families are non-bio. The data is suspect by the small size of the sample, covering only 24 families.

5. McCrea, op. cit., p. 26.
6. Agency procedures not only operate more favorably for HTPs, but for those adopting in-race as well, when compared with the total population. Falk's data shows IRAs to be above the mean for U.S. families by traditional SES categories. Agency practices favor whites and those with upper incomes, as opposed to blacks (and other minorities) and those with lower incomes as Festinger's study shows. See Falk, op. cit., and Trudy Festinger, op. cit.) Why Some Choose not to Adopt Through Agencies, NY: Metropolitan Applied Research Center, April 1972.
7. This is not to suggest that non-bio HTP families adopting "hard-to-place" children involuntarily, as was the case with the families Kadushin studied. Indeed the increase in role discretion for adoptive families seems to have been generalized. Two-thirds of non-bio HTPs had adopted only "hard-to-place" children, while the other one-third had adopted both "hard-to-place" and "in-race." Other than an increased emphasis by non-bios on personal reasons for adopting (which is linked to adoption as the only available means for family formation) motivations of bios and non-bios seem essentially the same, notably in those instances where a family has two or more children.)
8. Male age is used for analysis of the age profile of families. Male and female age correlate at the 0.00 level of significance, with females usually one age cohort below males, or approximately 2-5 years younger.
9. Roskies, St. Denis and Falk all report that trans-racial adoptive families are "independent" of the extended family. In summarizing Roskies' study, for example, McCrea characterizes TRAS as persons "who didn't give a damn whether their parents approved or disapproved. In other words, they were emotionally emancipated from their parents and could make a decision that might not be entirely the one their parents would have made." McCrea, op. cit., p. 26. For an extremely helpful analysis of emerging kinship patterns, see Bert N. Adams, KINSHIP IN AN URBAN SETTING, Chicago: Markham, 1968. He notes that "it is not, in the final analysis, isolation from parents which is either desired or

accomplished by young adults in our society; it is independence and maturity." (p. 91). He also reaches important conclusions on the role of distance, sex and occupational position as related to kinship patterns.)

10. Henry J. Keenan, Jr., "The Interracial Family Through Transracial Adoption." in Irving R. Stuart and Lawrence Edwin Abt. (eds.), *INTERRACIAL MARRIAGE: EXPECTATIONS AND REALITIES*, NY: Grossman Publishers, 1973, p. 113.
11. Falk, op. cit., and St. Denis, op. cit.
12. There is an ongoing discussion about the impact of technological innovation in contraceptive methods on decisions about family size and formation method. In an article on the issue of low fertility rates, Bumpass suggests that the pill (and subsequent technological innovations in contraceptives) has lead to a societal expectation that fertility can absolutely be controlled. The changes in sterilization attitudes and practices are an example of the realignment of values in one area as an adjustment to a new milieu introduced by technological innovation. The most pervasive impact is on 'motherhood' as an ascribed status. Motherhood is no longer an ascribed status, something for which every girl must be prepared. Rather it is volitional, and therefore an achieved status. Though Bumpass does not explicitly make the conclusion, it is obvious that when motherhood becomes volitional it is separable from reproduction. Its achievement is more a matter of 'parenting.' Thus for those women not wishing to bear children (at all, or more than a replacement amount) but wishing to parent, adoption becomes a viable choice. See Larry L. Bumpass, "Is Low Fertility Here to Stay?" *FAMILY PLANNING PERSPECTIVES*, Spring 1973, pp. 67-69.

Chapter 5 - Footnotes

1. Reported in THE CHILD, March 1950, p. 444.
2. Eliot Freidson, "The Impurity of Professional Authority," in Howard S. Becker et al (eds.) INSTITUTIONS AND THE PERSON, Chicago: Aldine, 1968, p. 29.
3. Ibid, p. 28.
4. CWLA, Standards, op. cit., p. 10.
5. A 1949 Children's Bureau bulletin noted three aims of a good adoption law:
 - 1) To protect the child from unnecessary separation from natural parents who might give him a good home and loving care if they had help and guidance;
 - 2) To protect the natural parents from hurried, ill-considered decisions to give up their child;
 - 3) To protect adoptive parents from taking responsibility for a child about whose heredity or capacity for development they know nothing.
 as reported in THE CHILD, March 1950, p. 144.
6. Part of the reason for confining adoptive placement to such children was the belief that agencies should 'certify' the child. Physicians supported the concept that only the child without physical defects should be recommended for adoptions. Those who asked to adopt an "imperfect" child were looked upon with suspicion. See Colette Taube Dywasuk, ADOPTION--IS IT FOR YOU? NY: Harper and Row, 1973, p. 6.
7. See Margaret Kornitzer, CHILD ADOPTION IN THE MODERN WORLD, London: Putnam, 1952, p. 71.
8. W. H. Slingerland, CHILD-PLACING IN FAMILIES: A MANUAL FOR STUDENTS AND SOCIAL WORKERS, NY: Russell Sage Foundation, 1919, p. 118.
9. "The dispensers of the service define as individual's problems, the services he requires, and the appropriate moral attitudes that should be taken in his situation. These decisions are made largely on the basis of the agency's function." Rein, op. cit., p. 48-9.
10. H. David Kirk, in Rael Jean Isaac, ADOPTING A CHILD TODAY, NY: Harper and Row, 1965, p. vii.

11. Rita Dukette, "Some Casework Implications in Adoptive Home Intake Procedures," in Smith, op. cit., p. 271.
12. The use of matching adoption is paralleled in the therapeutic activities of social workers and others by a claim for non-directiveness. Halmos calls this "the fiction of non-directiveness." The scrupulous and sometimes ostentatious non-interventionism of counselling, he suggests, is obviously doctrinaire. The counsellor's faith in non-directiveness is merged with his professional commitment to direct the patient to health, no matter how obliquely. But even where such deliberate influencing takes place a core of the fiction is preserved. It must be, to ensure the professional's prerogatives. See Paul Halmos, THE FAITH OF THE COUNSELLORS: A STUDY IN THE THEORY AND PRACTICE OF SOCIAL CASEWORK AND PSYCHOTHERAPY, NY: Schocken Boos, 1966.
13. "The professional strategy of dyadic intervention appears to screen out information about the environment....There appears to be great pressure to define problems as inhering in the individual apparently because professional intervention takes place at this level." Rein, op. cit., p. 56.
14. Row, op. cit., pp. 154 and 249.
15. Schon, op. cit., p. 47.

Chapter 6 - Footnotes

1. The two primary sources are the statistical series published by HEW's National Center for Social Statistics entitled SUPPLEMENT TO CHILD WELFARE STATISTICS--(year): ADOPTIONS IN (year), beginning in 1957; and periodic reports on TRENDS issued by the Child Welfare League of America.
2. 1970 Census, Population Characteristics No. 212, Febr. 1, 1971, Series P-20, Table 4.
3. U.S. Department of Health Education and Welfare, National Center for Social Statistics, "Children Served by Public Welfare Agencies and Voluntary Child Welfare Agencies and Institutions March 1970," issued March 10, 1972. Based on Table 7. The number includes all those children receiving services in the following living arrangements: With relatives, in independent living arrangements, in foster care (foster family homes, group homes, child welfare institutions), in maternity homes, in other institutions, elsewhere and not reported. It excludes those in homes of parents, or in adoptive homes.
4. Gruber, op. cit. See especially Table II-9. The general picture portrayed in this study is confirmed in other studies.
5. Shirley Jenkins, "Duration of Foster Care: Some Relevant Antecedent Variables," CHILD WELFARE, October 1967, pp. 450-455. and Henry S. Maas and Richard E. Engler, CHILDREN IN NEED OF PARENTS, NY: Columbia University Press, 1959.
6. Because there is no standard measure of illegitimacy, the measures mostly commonly used--illegitimacy rate (number of illegitimate births per 1,000 unmarried--single, widowed or divorced--women age 15-44)--and aggregate data for this group--will be employed here. For a detailed discussion of the methodological issues see Phillips Cutright, "Illegitimacy: Myths, Causes and Cures," FAMILY PLANNING PERSPECTIVE, January 1971.
7. See Hegarty, op. cit. and O'Neill, op. cit.
8. In their recent study Kantner and Zelnik report that most young never-married women (15-19) who have had intercourse have used contraceptives at some time. (They had reported in an earlier study that about 28% of never-married young women of this age group report having had sexual intercourse, ranging from 14% at age 15 to 46% at age 19.) There is however a fair amount of "chance-taking." "Of the sexually active 15-19-year-olds, 53% failed to use any kind of contraception at the last time

they had intercourse; and among the youngest group--those aged 15--the figure reaches 71%. The picture for consistent use is even worse. Less than 20% of sexually experienced 15-19-year-olds report that they 'always' use some method to prevent conception during intercourse. A partial explanation of the low level of current use is the fact that a substantial number of those who have failed to use contraception believe that they cannot become pregnant, either because they are too young, because they have had sex too infrequently or because they had intercourse at the wrong time of the month." John F. Kantner and Melvin Zelnik, "Contraception and Pregnancy: Experience of Young Unmarried Women in the United States," FAMILY PLANNING PERSPECTIVES, Winter 1973, pp. 21-22. The belief that they cannot become pregnant is attributed by writers in the field to the fact that for most girls regular ovulation does not occur for several years after menstruation has begun.

9. See Cutright, op. cit., pp. 32-33, especially Figure 3, which plots illegitimacy rates by age cohort and fecundity for U.S. whites, 1960. See also his discussion of illegitimacy rate for changes in 23 nations.
10. Evidence of increased reliance on the pill and IUD, and decreased reliance on condoms and withdrawal among married couples is provided in Charles F. Westoff, "The Modernization of U.S. Contraceptive Practice," FAMILY PLANNING PERSPECTIVES, July 1972, pp. 9-12.
11. Kantner and Zelnick, op. cit., Tables 7. For a discussion of teenage use of contraception see also Sadjia Goldsmith et al, "Teenagers, Sex and Contraception," FAMILY PLANNING PERSPECTIVES, January 1972, pp. 32-39.
12. See Cutright, op. cit., p. 35, Figure 4.
13. A projection made by the National Center for Health Statistics based on the 1965 illegitimacy rates estimated 403,000 illegitimate births by 1980. See National Center for Health Statistics, TRENDS IN ILLEGITIMACY: United States 1940-1965, Washington: Public Health Service, February 1968, p. 10.
14. On January 22, 1973 the U.S. Supreme Court ruled in Roe V. Wade, that the "right of privacy....founded in the Fourteenth Amendment's concept of personal liberty....is broad enough to encompass a woman's decision whether or not to terminate her pregnancy" see "Abortion: The High Court Has Ruled" FAMILY PLANNING PERSPECTIVES, Winter 1973, inside cover.

15. See "Supreme Court Bars Restrictive Mass. Birth Control Law," FAMILY PLANNING DIGEST, July 1972, p. 11.
16. For a review of student oriented literature see Takey Crist and Lana Starnes, "Student Printing Presses Bring Birth Control Story to Colleges," FAMILY PLANNING PERSPECTIVES, January 1972, pp. 60-61. For a good example of a general medical book with useful information on sex, birth control and abortion see Women's Health Collective of Boston, OUR BODIES, OURSELVES, New York: Simon and Schuster, 1972.
17. "Has Legal Abortion Contributed to U.S. 'Birth Death?'" FAMILY PLANNING PERSPECTIVE, April 1972, pp. 7-8.
18. Christopher Tietze, "Two Years' Experience with a Liberal Abortion Law: Its Impact on Fertility Trends in New York City," FAMILY PLANNING PERSPECTIVES, Winter 1973, p. 36.
19. Ibid, p. 39.
20. The 'High' estimate represents a steady increase in proportion of illegitimate births through 1973, initially at the same rate as 1967-68, though the amount of proportionate increase tapers beginning in 1971. The High estimate is a situation in which unmarried women in general are denied access to effective contraception and at-demand abortion through 1972, though in some instances they will have access (as for example in New York beginning in 1970). By comparison married women will have access to effective contraception particularly, thus the marital birth rate will drop more quickly than illegitimate birth rate. However, in 1973 and 1974 court decisions will make both contraception and abortion generally available, and illegitimate birth rate will stabilize at the same general rate as marital birth rate. Thus a steady proportion exists from 1973 to 1974. Under the High estimate 1974 would be the first year when the estimated absolute number of illegitimate live births is less than that recorded for 1968. 1969 or 1970 are better years for purposes of comparison as supply factor for adoptions as they are acknowledged to be the last years when infants were generally available. On that basis infant shortage for adoption by aggregate illegitimate live births would begin, even under the High estimate, in 1972. The 'Mid' estimate shows a proportionate increase of 0.4% for the years 1969 and 1970, and tapers off beginning in 1972. Aggregate illegitimate live births drops below the 1968 level in 1973, but below the 1969 level in 1972. The mid estimate represents a moderately rapid diffusion of effective contraception and legal abortion to unmarried women. Finally the 'Low' estimate shows only slightly

increased in 1969 and 1970, with a decrease in proportion beginning in 1972. Under conditions of the Low estimate the aggregate illegitimate live births drops below the 1968 level in 1972. The low estimate presumes rapid diffusion of effective contraception and legal abortion to unmarried women, in much the same situation as described for New York City by Teitze.

21. Dawn Day Wachtel, "Options of the Single Pregnant Woman," The Political Economy of Women. Review of Radical Political Economics, July 1972, p. 100.
22. Edwin Riday, SUPPLY AND DEMAND IN ADOPTION, NY: July 1969, see Table 3. p. 4.
23. Ibid, Table 14.
24. Michael J. Smith, "Selected Adoption Data for 1969, 1970 and 1971" CWLA memo, April 14, 1972, Table 1.
25. Barbara Haring, "Adoption Statistics," CWLA memo, March 28, 1973, Table 4.
26. Riday, op. cit. Table 3.
27. Haring, op. cit., Table 4.
28. Smith, op. cit., Table 1.
29. Haring, op. cit., Table 4.
30. See Isaac, op. cit.
31. Madison, op. cit. This includes both relative and non-relative adoption.
32. Adoptions in 1971, op. cit.
33. Riday, op. cit., Table 2.
34. Smith, op. cit., Table 1.
35. Haring, op. cit., Table 1.
36. Adoptions in (Year), op. cit.
37. Ibid.
38. Evelyn Keene, "Road to adoption can be smoother," Boston Globe, July 8, 1973, p. A-1.

39. Haring, op. cit., Table 6.
40. See Elizabeth Herzog and Rose Bernstein, "Why So Few Negro Adoptions?", CHILDREN, January-February 1965, pp. 14-18.
Also see Herzog et al, op. cit.
41. Adoptions in 1971, op. cit.
42. MARE Statistics, FY 1971, Table III.
43. It should also be noted that this calculation over-represents the probable adoption of infants born illegitimately, as only 83% of non-relative adoptions in 1971 were of children under 1 year.
44. Personal interview with Ms. Gail Murray, Unwed Mothers Project, Lynn Catholic Family Services, May 31, 1973.
45. Calculation based on 72,000 non-relative adoptions of children born out of wedlock, 83% of which would be 1 year or younger.
46. See Wachtel, op. cit.
47. Riday, op. cit., Table 4.
48. Ibid, Tables 2 and 3.
49. Ibid, Table 4.
50. See Wachtel ADOPTION AGENCIES AND THE ADOPTION OF BLACK CHILDREN: SOCIAL CHANGE AND EQUAL OPPORTUNITY IN ADOPTION, unpublished PhD dissertation, University of Michigan, 1972.
51. Smith, op. cit., Table 1.
52. Smith op. cit., Table 1 and Haring, op. cit., Table 5.

Chapter 7 - Footnotes

1. An excellent description of this sort of activity is found in Salkmann's recent book. Indeed the book represents the best available description of a family's perceptions throughout the adoption process. Victoria Salkmann, *THERE IS A CHILD FOR YOU: A FAMILY'S ENCOUNTER WITH MODERN ADOPTION*, NY: Simon and Schuster, 1972.
2. See for example David Fanshel, *A STUDY IN NEGRO ADOPTION*, NY: CWLA, 1957; Bradley, op. cit.; Festinger, op. cit. For a discussion of many of the outreach issues see Dawn Day Wachtel, *ADOPTION AGENCIES AND THE ADOPTION OF BLACK CHILDREN: SOCIAL CHANGE AND EQUAL OPPORTUNITY IN ADOPTION*, unpublished PhD dissertation, University of Michigan, 1972.
3. The issue of the effectiveness of a recruitment campaign under any circumstances is another matter. There is no systematic research on recruitment effectiveness in the adoption field. A systematic study on the effect of mass media advertising on contraceptive practice and use of family planning clinics showed that while awareness of the issues and the content of the ads increased, actual clinic use and contraceptive use (the latter measured by contraceptive sales) did not increase significantly. However, a closer analysis regarding clinic use showed that appointment backlogging severely frustrated what clearly otherwise would have been a major increase in clinic use. Thus there is some reason to suggest that the essence of a recruitment campaign is the capability of an agency to absorb a sudden increase in demand on services. This in turn relates to what an agency considers as essential to the service (and related procedures) offered any given family. On the recruitment campaign in family planning see J. Richard Udry, Lydia T. Clark, Charles L. Chase and Marvin Levy, "Can Mass Media Advertising Increase Contraceptive Use?" *FAMILY PLANNING PERSPECTIVE*, July 1972, pp. 37-44 and Lydia T. Clark, J. Richard Udry and Steven S. Nelson, "Appointment Backlog Frustrates Ad Campaign Potential," *FAMILY PLANNING PERSPECTIVES*, Winter 1973, pp. 4-5. On the issue of essential service procedures see Hagen, op. cit.
4. Interestingly, of the 20 programs described in Herzog et al, *FAMILIES FOR BLACK CHILDREN*, Volume II: Programs and Projects, only 9 had any significant degree of parent group involvement. Of the 9, one was a parent group itself and another was an agency created by a parent group.

Chapter 8 - Footnotes

1. Data from the national sample of HTPs shows a relationship between first feeling on contact, and nature of initial contact (individual, couple, group) and a number of indices of quality and effectiveness of the adoption process, such as time to placement, number of agencies contacted, satisfaction with agency, evaluation of agency strengths and weaknesses and the like. For a further discussion see Nutt and Snyder, TRANS-RACIAL ADOPTION, op. cit. Isaac also suggests that the critical time in the adoption process is the first half of the first interview. Isaac, op. cit.
2. Hegarty, op. cit.
3. See Griffin and Arffa, op. cit.

Chapter 9 - Footnotes

1. See Billingsley, op. cit.
2. The bias against the language used by parents to describe their interests and motivations presents an interesting case of value-laden response. The bias was expressed by nearly every agency with an orientation to an evaluative approach in the family study. Motivations were constantly scrutinized for evidences of what can only be called 'pathology.' Yet rarely did an agency indicate what it considered to be a satisfactory motivation for doing an unusual thing such as adopting and/or adopting a "hard-to-place" child. No consideration was given to the probability that families used such language as found in the popular press ('a child whom nobody seems to want') because it was the only language they had seen, or that they assumed agencies agreed with it because agencies would be responsible for such publicity. The double-bind into which such agencies force potential parents is even more ironic since they rarely if ever participate in recruitment or design and writing of recruitment material.

Chapter 13 - Footnotes

1. Robert D. McFadden, "Jersey Judge, Citing Need for Religion, Orders Return of Child," New York Times, November 9, 1970.

Chapter 15 - Footnotes

1. McCrea, op. cit., p. 24.
2. See Wachtel, ADOPTION AGENCIES..., op. cit., p. 107.
3. For a discussion of these in other contexts see Lipsky, op. cit., pp. 32-34.

BIBLIOGRAPHYBooks and Reports

- Abcarian, C. (ed.), POLITICAL PARTICIPATION AND SOCIAL-PSYCHOLOGICAL PROCESSES. Columbus, Ohio: Charles E. Morrill Books, Inc., 1970.
- Adams, Bert N., KINSHIP IN AN URBAN SETTING. Chicago: Markham, 1968.
- ✓ Anderson, David, CHILDREN OF SPECIAL VALUE: INTERRACIAL ADOPTION IN AMERICA. New York: St. Martin's Press, 1971.
- Bachrach, Peter and Morton S. Baratz, POWER AND POVERTY. New York: Oxford University Press, 1970.
- Becker, Howard S. et al. (eds.), INSTITUTIONS AND THE PERSON. Chicago: Aldine, 1968.
- Benson, Leonard, FATHERHOOD: A SOCIOLOGICAL PERSPECTIVE. New York: Random House, 1968.
- Billingsley, Andrew, BLACK FAMILIES IN WHITE AMERICA. Englewood Cliffs, New Jersey: Prentice-Hall, 1968.
- ✓ Billingsley, Andrew and Jeanne M. Giovannoni, CHILDREN OF THE STORM: BLACK CHILDREN AND AMERICAN CHILD WELFARE. New York: Harcourt Brace Jovanovich, 1972.
- Blau, Peter, THE DYNAMICS OF BUREAUCRACY. Chicago: University of Chicago Press, 1963.
- Bradley, Trudy, AN EXPLORATION OF CASEWORKERS' PERCEPTIONS OF ADOPTIVE APPLICANTS. New York: Child Welfare League of America, 1967.
- Child Welfare League of America, STANDARDS FOR ADOPTION SERVICE - REVISED. New York: CWLA, 1968.
- Costin, Lela, CHILD WELFARE: POLICIES AND PRACTICES. New York: McGraw-Hill, 1972.
- Crozier, Michel, THE BUREAUCRATIC PHENOMENON. Chicago: University of Chicago Press, 1964.
- ✓ Dukette, Rita and Thelma G. Thompson, ADOPTIVE RESOURCES FOR NEGRO CHILDREN. New York: CWLA, 1959.
- Dywasuk, Colette Taube, ADOPTION - IS IT FOR YOU? New York: Harper Row, 1973.
- Etzioni, Amatai, A COMPARATIVE ANALYSIS OF COMPLEX ORGANIZATIONS. New York: The Free Press, 1961.
- ✓ Fanshel, David, A STUDY IN NEGRO ADOPTION. New York: CWLA, 1957.
- Festinger, Trudy Bradley, WHY SOME CHOOSE NOT TO ADOPT THROUGH AGENCIES. New York: Metropolitan Applied Research Center, April 1972.
- Forsythe, Joyce (ed.), FRONTIERS IN ADOPTION. Ann Arbor, Council on Adoptable Children, 1969.
- Fox, Robin, KINSHIP AND MARRIAGE. Baltimore: Penguin, 1967.
- Fredericksen, Hazel and R. A. Mulligan, THE CHILD AND HIS WELFARE. San Francisco: W. H. Freeman and Co., 1972 (3rd edition).
- Glaser, Barney G. and Anselm Strauss, THE DISCOVERY OF GROUNDED THEORY: STRATEGIES FOR QUALITATIVE RESEARCH. Chicago: Aldine, 1967.

- Gruber, Alan R., FOSTER HOME CARE IN MASSACHUSETTS: A STUDY OF FOSTER CHILDREN, THEIR BIOLOGICAL AND FOSTER PARENTS. Boston: Governor's Commission on Adoption and Foster Care, 1973.
- Halmos, Paul, THE FAITH OF THE COUNSELLORS. New York: Schocken Books, 1966.
- Harris, C.C. (ed.), READINGS IN KINSHIP IN URBAN SOCIETY. New York: Pergamon Press, 1970.
- ✓ Herzog, Elizabeth, et al., FAMILIES FOR BLACK CHILDREN. Washington, D.C.: Office of Child Development, 1971.
- Isaac, Rael Jean, ADOPTING A CHILD TODAY. New York: Harper and Row, 1965.
- Jaffee, Benson and David Fanshel, HOW THEY FARE IN ADOPTION: A FOLLOWUP STUDY. New York: Columbia University Press, 1970.
- Kadushin, Alfred, ADOPTING OLDER CHILDREN. New York: Columbia Univ. Press, 1970.
- Kirk, H. David, SHARED FATE: A THEORY OF ADOPTION AND MENTAL HEALTH. New York: Free Press, 1964.
- Klibanoff, Elton and Susan Klibanoff, ADOPTIONS. Boston: Little, Brown, in press.
- Kornitzer, Margaret, CHILD ADOPTION IN THE MODERN WORLD. London: Putnam, 1952.
- Lawder, Elizabeth A. et al., A FOLLOWUP STUDY OF ADOPTIONS: POST-PLACEMENT FUNCTIONING OF ADOPTIVE FAMILIES. New York: CWLA, 1969.
- Leavey, Morton J., LAW OF ADOPTION (3rd edition). Dobbs Ferry, New York: Oceana Publications, 1968.
- Leslie, Gerald, THE FAMILY IN SOCIAL CONTEXT. New York: Oxford University Press, 1967.
- Levine, Murray and Adeline Levine, A SOCIAL HISTORY OF HELPING SETTINGS: CLINIC, COURT, SCHOOL AND COMMUNITY. New York: Appleton-Century-Crofts, 1970.
- Lombard, John F., MASSACHUSETTS PRACTICE (Vol. 3): ADOPTION, ILLEGITIMACY, AND BLOOD TESTS. Boston: Boston Law Book Co., 1952 with up dates.
- ✓ Maas, Henry S. and Richard E. Engler, CHILDREN IN NEED OF PARENTS. New York: Columbia University Press, 1959.
- Meredit, Judy, NOW WE ARE A FAMILY. Boston: Beacon Press, 1972.
- Mouzelis, Nicos P., ORGANIZATION AND BUREAUCRACY: AN ANALYSIS OF MODERN THEORIES. Chicago: Aldine, 1968.
- Myrdal, Alva, NATION AND FAMILY. Cambridge: MIT Press edition, 1968 (original 1941).
- National Center for Health Statistics, TRENDS IN ILLEGITIMACY: United States, 1940-1965. Washington, D.C.: Public Health Service, February, 1968.
- Nimkoff, M. F. (ed.), COMPARATIVE FAMILY SYSTEMS. Boston: Houghton, Mifflin Co., 1965.
- Nutt, Thomas E. and John A. Snyder, TRANS-RACIAL ADOPTION. Cambridge: MIT Department of Urban Studies and Planning, February 1973.
- ODS of Mass., CHILDREN WHO WAIT, Proceedings of the 2nd International Conference on Trans-Racial Adoptions, Boston, 1970.
- Open Door Society of Missouri, TASK FORCE REPORTS: 3rd North American Conference on Adoptable Children, St. Louis, April 21-23, 1972.

- ODS of Montreal, MIXED RACE ADOPTIONS, Proceedings of 1st International Conference on Mixed Race Adoptions, Montreal, 1969.
- Peck, Evelyn Foster, ADOPTION LAWS IN THE UNITED STATES, U. S. Dept. of Labor, Children's Bureau, Publication No. 148. Washington, D.C.: GPO, 1925.
- Piven, Francis Fox and Richard A. Cloward, REGULATING THE POOR: THE FUNCTIONS OF PUBLIC WELFARE. New York: Pantheon Books, 1971.
- Randall, C. D. (ed.), HISTORY OF CHILD SAVING IN THE UNITED STATES. Boston: George Ellis, Printer, 1893.
- Rein, Martin, SOCIAL POLICY: ISSUES OF CHOICE AND CHANGE. New York: Random House, 1970.
- Riday, Edwin, SUPPLY AND DEMAND IN ADOPTION. New York: CWLA, July 1969.
- Rothman, David J., THE DISCOVERY OF THE ASYLUM. Boston: Little, Brown and Co., 1971.
- Rourke, Francis E., BUREAUCRACY, POLITICS AND PUBLIC POLICY. Boston: Little, Brown & Co., 1969.
- Rowe, Jane, PARENTS, CHILDREN AND ADOPTION: A HANDBOOK FOR ADOPTION WORKERS. London: Routledge and Kegan Paul, 1966.
- Salkmann, Victoria, THERE IS A CHILD FOR YOU: A FAMILY'S ENCOUNTER WITH MODERN ADOPTION. New York: Simon and Schuster, 1972.
- Sarason, Seymour, THE CREATION OF SETTINGS AND THE FUTURE SOCIETIES. San Francisco: Jossey-Bass, Inc., 1972.
- Schon, Donald A., BEYOND THE STABLE STATE. New York: W. W. Norton & Co., 1971.
- Shapiro, Michael, A STUDY OF ADOPTION PRACTICE. New York: CWLA, 1956.
- Slingerland, W. H., CHILD PLACING IN FAMILIES: A MANUAL FOR STUDENTS AND SOCIAL WORKERS. New York: Russell Sage, 1919.
- Smith, I. Evelyn (ed.), READINGS IN ADOPTION. New York: Philosophical Library, 1963.
- Stuart, Irving R. and Lawrence Edwin Abt (eds.), INTERRACIAL MARRIAGE: EXPECTATIONS AND REALITIES. New York: Grossman Publishers, 1973.
- Weber, Max, ESSAYS IN SOCIOLOGY (trans. H. H. Gerth and C. W. Mills). New York: Oxford University Press, 1946.
- Weber, Max, THE THEORY OF SOCIAL AND ECONOMIC ORGANIZATION (trans. A.M. Henderson and Talcott Parsons). New York: Oxford University Press, 1947.
- Witemer, Helen L. et al., INDEPENDENT ADOPTIONS. New York: Russell Sage Foundation, 1965.
- Women's Health Collective of Boston, OUR BODIES, OURSELVES. New York: Simon Schuster, 1972.
- Wynn, Margaret, FAMILY POLICY. London: Michael Joseph, 1970.

Articles

- Barber, Bernard, "The Sociology of Professions," DAEDALUS, Fall 1963, pp. 669-688.
- Billingsley, Andrew, "Bureaucratic and Professional Orientation Patterns in Social Casework," THE SOCIAL SERVICE REVIEW, December 1964, pp. 400-407.

- Boernzweig, Herman, "Social Work and Psychoanalytic Theory: A Historical Analysis," SOCIAL WORK, January 1971, pp. 7-16.
- Bumpass, Larry L., "Is Low Fertility Here to Stay?", FAMILY PLANNING PERSPECTIVES, Spring 1973, pp. 67-69.
- Clark, Lydia T., J. Richard Udry, and Steven S. Nelson, "Appointment Backlog Frustrates Ad Campaign Potential," FAMILY PLANNING PERSPECTIVES.
- Crist, Takey and Lana Staines, "Student Printing Presses Bring Birth Control Story to Colleges," FAMILY PLANNING PERSPECTIVES, January 1972, pp. 60-61.
- Cutright, Phillips, "Illegitimacy: Myths, Causes and Cures," FAMILY PLANNING PERSPECTIVES, January 1971, pp. 23-48.
- Dunne, Phyllis, "Placing Children of Minority Groups for Adoption," CHILDREN, March-April, 1958, pp. 43-48.
- ✓ Falk, Lawrence L., "A Comparative Study of Transracial and Inracial Adoptions," CHILD WELFARE, February 1970, pp. 82-88.
- Fanshel, David, "Approaches to Measuring Adjustment in Adoptive Parents" in Quantitative Approaches to Parent Selection, New York: CWLA, 1962.
- ✓ Fricke, Harriet, "Inter-racial Adoption: The Little Revolution," SOCIAL WORK, July 1965, pp. 92-97.
- ✓ Gallagher, Ursula, "Adoption Resources for Black Children," CHILDREN, March-April, 1971, pp. 49-53.
- Gaylin, Ned L., "The Family is Dead--Long Live the Family," YOUTH AND SOCIETY, September, 1971, pp. 60-79.
- Goldsmith, Sadjia, et al., "Teenagers, Sex and Contraception," FAMILY PLANNING PERSPECTIVES, January 1972, pp. 32-38.
- ✓ Griffin, Barbara and Marvin S. Arffa, "Recruiting Adoptive Homes for Minority Children--One Approach," CHILD WELFARE, February 1970, pp. 105-107.
- Hagen, Clayton, "Matching Values: Matching the Value of a Child with Parents' Values," in Mixed Race Adoption, Open Door Society, Montreal, 1969.
- Hanna, Agnes K., "Some Problems in Adoption," THE CHILD, Vol. 1, No. 6 (1936).
- Hawkins, Mildred, "The New Look in Adoptions," CATHOLIC CHARITIES REVIEW, December 1969, pp. 4-9.
- ✓ Herzog, Elizabeth and Rose Bernstein, "Why So Few Negro Adoptions?", CHILDREN, January-February 1965, pp. 14-18.
- Hornecker, Alice, "Adoption Opportunities for the Handicapped," CHILDREN, July-August, 1962, pp. 149-152.
- Jenkins, Shirley, "Duration of Foster Care: Some Relevant Antecedent Variables," CHILD WELFARE, October 1967, pp. 450-455.
- ✓ Jones, Edmond D., "On Transracial Adoption of Black Children," CHILD WELFARE, March 1972, pp. 156-164.
- Kantner, John F. and Melvin Zelnik, "Contraception and Pregnancy: Experience of Young Unmarried Women in the United States," FAMILY PLANNING PERSPECTIVES, Winter 1973, pp. 21-35.
- Keene, Evelyn, "Road to adoption can be smoother," BOSTON GLOBE, July 18, 1972, A-1.

- Madison, Bernice Q., "Adoption: Yesterday, Today and Tomorrow," CHILD WELFARE, May 1966, pp. 253 ff., and June 1966, pp. 341-348, and Winter 1973, pp. 4-5.
- McFadden, Robert D., "Jersey Judge Citing Need for Religion, Orders Return of Child," NEW YORK TIMES, November 9, 1970.
- Mondloh, Raymond, "Changing Practices in the Adoptive Home Study," CHILD WELFARE, March 1969, pp. 148-156.
- ✓ Morgenstern, Joseph, "The New Face of Adoption," NEWSWEEK, September 13, 1971, pp. 66 ff.
- Neilson, Jacqueline, "Placing Older Children in Adoptive Homes," CHILDREN TODAY, November-December 1972, pp. 7-13.
- Nutt, Thomas and John A. Snyder, "A Profile of Trans-racial Adoptive Parents," in CHILDREN WHO WAIT, pp. 36-46.
- Priddy, Drew and Doris Kagin, "Characteristics of White Couples Who Adopt Black/White Children," SOCIAL WORK, July 1971, pp. 105-107.
- Reiss, Ira, "The Universality of the Family: A Conceptual Analysis," JOURNAL OF MARRIAGE AND THE FAMILY, November, 1965, pp. 443-453.
- Stack, Carol B., "Parenthood and Personal Kinship Networks Among Blacks 'On Aid'," THE JOURNAL OF COMPARATIVE FAMILY STUDIES, Autumn, 1972, pp. 194-206.
- Sussman, Marvin, "Family Systems in the 1970s: Analysis Policies and Programs," THE ANNALS, July 1971, pp. 40-56.
- Tietze, Christopher, "Two Years' Experience with a Liberal Abortion Law: Its Impact on Fertility Trends of New York City," FAMILY PLANNING PERSPECTIVES, Winter 1973, pp. 36-41.
- Turitz, Zitha R., "A New Look at Adoption: Current Developments in the Philosophy and Practice of Adoption," in TEACHING MATERIALS ON THE WELFARE OF CHILDREN. New York: Council of Social Work Education, 1969.
- Udry, J. Richard, Lydia T. Clark, Charles L. Chase and Marvin Levy, "Can Mass Media Advertising Increase Contraceptive Use?", FAMILY PLANNING PERSPECTIVES, July 1972, pp. 34-44.
- Wachtel, Dawn Day, "Options of The Single Pregnant Woman," THE POLITICAL ECONOMY OF WOMEN. REVIEW OF RADICAL POLITICAL ECONOMICS, July 1972, pp. 86-106.
- Westoff, Charles F., "The Modernization of U.S. Contraceptive Practice," FAMILY PLANNING PERSPECTIVES, July 1972, pp. 9-12.
- Yanekian, Voskine, "Inter-Country Adoptions," CHILD WELFARE, October 1958, pp. 25-29.

Unpublished Material

- Hagen, Clayton H., "The Premise of Adoption," mimeo, 7 pp., nd.
- _____, "An Approach to Adoption," mimeo, 16 pp., 1964.
- _____, "Basic Values in Adoption," paper presented to Adoptive Parents Committee of New York, 1965.
- _____, "Interracial Adoption," paper presented to Bloomington Human Relations Council, 1966.
- _____, "Is the hard to place child so hard to place?", mimeo, 14 pp., 1967.
- _____, "The Contributions of social work to adoption," mimeo, 20 pp. April 1970.

- Haring, Barbasa, "Adoption Statistics," CWLA memo, March 28, 1973.
- Lebo, Jeanne et al, ADOPTIVE PLACEMENT OF THE NEGRO-CAUCASIAN CHILD, unpublished Masters Thesis, University of Minnesota, 1965.
- Lipsky, Michael, "Toward a Theory of Street-Level Bureaucracy," mimeo, 51 pp., n.d.
- Messenger, Katherine P., "The Selection of Parents by Adoption Agencies: A Study in Conflicting Goals and Values," mimeo, 36 pp., January 1971.
- Roskies, Ethel, AN EXPLORATORY STUDY OF THE CHARACTERISTICS OF ADOPTIVE PARENTS OF MIXED RACE CHILDREN IN THE MONTREAL AREA, unpublished M.A. Thesis, University of Montreal, 1963.
- Smith, Michael J., "Selected Adoption Data for 1969, 1970, and 1971," CWLA memo, April 1974.
- St. Denis, Gerald C., INTERRACIAL ADOPTIONS IN MINNESOTA: SELF-CONCEPT AND CHILD REARING ATTITUDES OF CAUCASIAN PARENTS WHO HAVE ADOPTED NEGRO CHILDREN, Unpublished Ph.D. dissertation, University of Minnesota, 1969.
- Wachtel, Dawn Day, ADOPTION AGENCIES AND THE ADOPTION OF BLACK CHILDREN: SOCIAL CHANGE AND EQUAL OPPORTUNITY IN ADOPTION, unpublished Ph.D. dissertation, University of Michigan, 1972.
- Zastrow, Charles, OUTCOME OF NEGRO CAUCASIAN INTER-RACIAL ADOPTIONS, unpublished Ph.D. dissertation, University of Wisconsin, 1971.